

Reproductive health and well-being in rural Ethiopia: girls in transition to adulthood 2010-13

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Introduction

Girls and young women in transition to adulthood² in rural Ethiopia in the period 2010-13 faced a number of potential risks to their reproductive health and well-being. Some of these were associated with long-standing customary values and practices, and others with new modernising forces.



The customary practices considered in this chapter are *female circumcision*, *forced abduction*, *rape*, and *early marriage* when it is associated with sexual activity, pregnancy, child-bearing and motherhood for which the girl is not ready, physically and/or psychologically. National statistics³ show a reduction in all these practices associated with government action which began in 1987 with the establishment of the National Committee on Harmful Traditional Practices⁴. This was followed by the revision of the Family Code in 2000⁵ setting a minimum marriage age of 18, and the revised penal code 2004⁶ establishing punishments related to illegal female circumcision, rape and forced abduction.

² This chapter should be read in conjunction with Pankhurst's chapter on youth transitions to adulthood which provides a wider context for, and a more discursive approach to, the issues discussed here. For more from WIDE on transitions to adulthood see Bevan 2011.

³ Ethiopian Demographic Health Surveys 2000, 2005, 2011.

⁴ Later re-named EGLDAM, and then ODWaCE.

⁵ Federal Negarit Gazette Extra Ordinary Issue No. 1/2000 The Revised Family Code Proclamation No. 213/2000

⁶ The Criminal Code of the Federal Democratic Republic of Ethiopia 2004, published 2005.

The modernising forces with some consequences for girls' reproductive health and well-being were expanding female education⁷, increasing involvement of girls and young women in income-generating activities⁸ including migration for work⁹, and government action against harmful customary practices including early marriage. In many places these changes had reduced parental control of their teenage daughters, and contributed to increases in *youthful pregnancy outside marriage*, particularly among girls at school. In places where such pregnancies were 'taboo' unmarried girls were unlikely to have easy *access to contraception*, and more likely to resort to potentially harmful *customary abortions*.

Bad experiences related to these seven risk areas cause suffering at the time and might cause lasting physical and/or mental damage. One longer-term consequence is their potential to affect the condition and resilience of mothers as they move into and through pregnancies and their babies' early infancy¹⁰.

The next section explains the methodology used in the chapter. The bulk of the chapter provides WIDE3 evidence on the risks identified above and raises some related policy considerations. This is followed by a section summarising similarities and differences in reproductive risks for girls in transition to adulthood in different cultural contexts. In the final section important empirical conclusions are summarised and some policy considerations discussed.

Methodology

The chapter is based on an exploration of the WIDE 3 data, which was made in the twenty communities in three Stages between 2010 and 2013¹¹, for responses on the risks described above. The responses came mainly from interviews with wereda and kebele officials, health extension workers, parents, female adolescents and young women in each of the communities. These interviews were used together to construct narratives on each of the seven topics for each community, often using respondents' language¹², which are briefly summarised in the descriptive tables provided below. These are of interest in their own right and have also been used to identify notable issues related to each practice.

The next step in the interpretation/analysis process was to compare the communities descriptively. For each topic they were sorted into different types with separate tables constructed for each type. For example the communities fall into three categories when considering female circumcision: (1) not practised or virtually stopped (2) reduced practice and ban being enforced (3) still some practice and ban not being enforced. For each topic the (sorted) descriptive tables contain very brief narrative summaries of features of the practice in each community as described by respondents.

The second level of data interpretation and analysis for each risk was designed to investigate whether there was any association between different types of community practice and each of five community parameters; remoteness, religion, Region, local culture and timing of the fieldwork (see Table 1). Communities were allocated to one of two types of 'remoteness' (remoter and better connected); four types of religion (dominant religion Orthodox Christian, Protestant, Muslim, Customary); and the four Regions. It is important to emphasise that an association between a type of community (e.g. communities with a majority of Protestants) and a community parameter (e.g. rape continues to be a problem) is not assumed to be causal. The establishment of such an association in this sample is a trigger to go back to the wider community data to try to understand what lies behind it, if anything, and to raise related questions using other studies.

⁷ See the chapter on education

⁸ See the chapter on women's economic participation

⁹ See the chapter on migration

¹⁰ There is more on pregnancy, delivery and early infancy in the chapter on maternal and infant health and well-being

¹¹ Stage 1 fieldwork in six communities in early 2010; Stage 2 in eight communities in late 2011; Stage 3 in six communities in March/April and October/November 2013.

¹² These will be made available on the Ethiopia WIDE website (<http://ethiopiawide.net/>) in due course.

Table 1: Region, remoteness, religion and research timing in the WIDE3 communities

	Region				
	Tigray	Amhara	Oromiya	SNNP	Total
<i>Remoteness</i>					
Remote/very remote	2	2	3	5	12
Better connected		2	5	1	8
Total	2	4	8	6	20
<i>Religion</i>					
Predominantly Muslim		1	5		6
Predominantly Orthodox Christian	2	3	1		6
Predominantly Protestant			1	4	5
Predominantly mixed Christian				1	1
Predominantly traditional*			1	1	2
Total	2	4	8	6	20
<i>Local culture</i>					
East Tigrayan	1				
East Tigrayan/Irob	1				
North Wollo Amhara		1			
East Gojam Amhara		1			
North Shewa Amhara		1			
Argobba/North Shewa Amhara		1			
East Shewa Oromo			1		
Karrayu/Ittu/ Somali			1		
East Harerghe Oromo			1		
Arsi Oromo			1		
Arsi Oromo/Shewa Oromo/Amhara			1		
Arsi Oromo/Tigrayan/Amhara/Southern immigrants			1		
West Shewa Oromo			1		
Jimma Oromo			1		
Gurage				1	
Gedeo				1	
Wolayta				1	
Kembata				1	
Gamo 75%/Wolayta/Maale/Amhara				1	
Tsemai				1	
Total	2	4	8	6	20
<i>Timing of research</i>					
Stage 1 communities early 2010	1	2	2	1	6
Stage 2 communities late 2011	1	1	2	4	8
Stage 3 communities 2013		1	4	1	6
Total	2	4	8	6	20

For each risk there is a summarising table in the Appendix which displays the numbers of communities in the different risk-categories in the columns (e.g. (1) rape still a problem; (2) rape reduced) and the different parameter-categories in the rows (e.g. (1) remoter; (2) better connected). These tables compare the numbers of communities in each cell with the numbers expected if there were no pattern (in brackets)¹³. This exercise does not make use of formal statistical procedures but was designed to assist thinking and generate hypotheses which could be explored using other data. The absence of patterns is just as interesting as the suggestion of connections.

The third level of data analysis focused on the combined reproductive risks experienced by girls and young women in each of the different communities, once more sorting the communities into types.

¹³ There is an explanation of how the procedure works at the beginning of the Appendix.

This was done by constructing a modified truth table¹⁴ using the data on all the reproductive health risks facing young females in each community on a True/False basis (See Table A6 in the Appendix). Where there is an X in a cell the risk was higher and where there is a gap the risk was lower. The rows of the table (each represents a community) were then sorted so that communities with similar risk combinations were adjacent to each other. As discussed below this exercise allocated the exemplar WIDE3 communities into five types where the combination of risks was similar. Table A7-9 organise the rows within the different categories of Region, religion and remoteness in a search for patterns.

With this kind of small-N case-based analysis (Byrne and Ragin: 2009), which is not common in the international development field, the issue of what kinds of conclusions can be drawn is frequently raised. *First*, what might the data interpretation and analysis tell us about other rural communities in Ethiopia, given that there are only twenty and they are not ‘representative’ of all Ethiopia’s rural communities as a large national random sample of communities¹⁵ would be? One answer is that the thick descriptions using different respondents’ perspectives, and the narrative summaries based on them, provide a window for readers on to the meaning and complexities of reproductive risks to girls of different wealths in transition to adulthood in different geographical and cultural settings; and they encourage readers to search for important issues themselves. Another answer is that, while they are not ‘representative’, the WIDE communities were selected as *exemplars* of Ethiopia’s rural livelihood systems in the 1990s and, they are also exemplars of different local cultures, religions, Regions, and degrees of remoteness and thus potentially informative about other similar communities.

Second, what *kinds* of conclusions can be drawn? In this chapter there are three kinds.

(1) The comparative descriptive conclusions about communities can be seen as hypotheses, some of which are likely to apply widely to rural communities, while others will only pertain to a particular type of community. For example, in all communities people said that some girls under eighteen were still getting married and that the law was not being enforced, suggesting that this was likely to be the case quite widely in the period 2010-13. On the other hand considering marriage of younger girls, only in the two remote pastoralist communities were there people who said that girls of 12 were mature enough to marry, suggesting it would be worth enquiring further into such marriage customs in pastoralist communities.

(2) The comparative causal pattern analyses allow identification of those parameters (remoteness, religion, Region, local culture and time of research) which do *not* appear to be linked to the risks (female circumcision, rape, forced abduction, early marriage, pregnancy outside marriage, access to contraception, and customary abortions) and those where there seem to be connections. In the latter case policymakers at different government levels might benefit from exploring further using other data sources, and if the connection is confirmed using the information to target policies to particular kinds of communities.

(3) The reproductive risks for girls and young women in transition to adulthood are not the same in all communities. For example in some communities there is no female circumcision, in some contraception for young unmarried girls is available, in some forced abduction is not an issue. Identification by wereda officials of the mix of risks and the severity of each in their kebeles, which may not be the same, would allow them to design locally appropriate actions.

¹⁴ ‘Practically, a truth table is composed of one column for each input variable (for example, A and B), and one final column for all of the possible results of the logical operation that the table is meant to represent (for example, A XOR B). Each row of the truth table therefore contains one possible configuration of the input variables (for instance, A=true B=false), and the result of the operation for those values’. Wikipedia https://en.wikipedia.org/wiki/Truth_table accessed 14/7/16. The truth table in the Appendix is descriptive rather than causal and does not distinguish input and final variables.

¹⁵ Unfortunately this does not exist.

The next five sections of the chapter focus on female circumcision, rape, forced abduction, early marriage, and pregnancy outside marriage and its relation to access to contraception and the prevalence of customary abortions. Each section has four sub-sections. The first describes the risk of the practice to health and well-being. The second presents the descriptive data for each community organised in separate tables for each identified type. The third discusses the extent to which there are connections between the community parameters of remoteness, religion, local culture, Region, and timing of the research with different levels of risk of the practice. The fourth is a short policy discussion.

Female circumcision

The issues

Boyden *et al* suggest there are two cultural logics supporting the practice of female circumcision in Ethiopia¹⁶. First, young women's marriageability, which customarily has been a matter for family and kingroups, depends on their moral and domestic competencies which in many places has been believed to be positively influenced by circumcision. Second, 'in safeguarding their moral and domestic standing and thus their social integration, the practice is considered to be protective'. (2011: 5)

Female circumcision has a number of possible short-term physical consequences including pain, injury to adjacent tissue, bleeding, infection and failure to heal. Possible long-term consequences include difficulty in passing urine, recurrent urinary tract infection, difficulties in menstrual flow and fistula. There may also be psychosocial consequences. (Ministry of Health, n.d.: 42). In some cultures stigma is attached to those who are known not to be circumcised and they and their mothers may be publicly insulted. This causes distress and pressure to conform.

Comparison of the communities according to the risks associated with female circumcision

The data from the WIDE communities in 2010-13 shows that, though the practice had been declining nearly everywhere, female circumcision in rural Ethiopia was a complex issue. The practice took place at different ages in different cultural contexts. Among Orthodox Christians from Amhara and Tigray Regions the custom was usually to circumcise at seven days old. In some Oromo Muslim communities young women were circumcised shortly before or after marriage. In other Oromo communities and many Southern communities the practice took place some time before girls were deemed to be ready for marriage and sexual intercourse.

In terms of community concerns about the practice there were three broad types of community: circumcision not practised or virtually stopped (5 communities); government-led persuasion and the ban being enforced with punishments (9); government-led persuasion but the ban not being enforced (6). There were some differences within these three types: for example in two of the six communities where the ban was not being enforced the practice was declining anyway.

Table 2 shows that in two communities female circumcision had never been practised, while in two the practice, which had taken place when the infant was seven days old, had been abandoned earlier as a result of a ban introduced by the TPLF during the civil war. In the fifth community people from a number of walks of life said the practice had virtually stopped and was no longer an issue.

Table 2: Female circumcision not practised or virtually stopped (5 communities)

Community	Region	Practice	Remote-ness	Local culture	Dominant religion	Reasons
Geblen, E Tigray	Tigray	At 7 days in the past; abandoned	Very remote	Tigray/Irob	Orthodox	TPLF campaign against it in the 1970s and 80s
Harresaw, E Tigray	Tigray	At 7 days, not practised for a long time	Remote	Tigray	Orthodox	Not said but TPLF campaign?

¹⁶ There is more on female circumcision in the chapter on youth transitions.

Community	Region	Practice	Remote-ness	Local culture	Dominant religion	Reasons
Oda Dawata	Oromiya	OCs 7 days; Muslims a month < marriage; no practitioner	Fairly connected	Arsi Oromo/Shewa Oromo/Amhara	Muslim majority; OC minority	Virtually stopped - fines & prison sentences (3-15 yrs) threatened; people aware it is harmful
Adado, Gedeo	SNNP	Never practised	Remote	Gedeo	Protestant	Never part of customary culture
Luqa, South Omo	SNNP	Never practised	Very remote	Tsemay	Customary	Never part of customary culture

In nine communities wereda officials were trying to enforce the ban using strong persuasion, sometimes involving community leaders and NGOs, plus exemplar cases of fines and imprisonment (Table 3).

Table 3: Female circumcision – ban being enforced (9 communities)

Community	Region	Practice	Remote-ness	Local culture	Dominant religion	Ban and response
Yetmen, E Gojjam	Amhara	7 days old	Fairly connected	Gojjami	Orthodox	Law started to be enforced; not all babies circumcised - some secret practice. No problem in the community – people can do it or not
Shumsheha, N Wollo	Amhara	Some said 7 days; some 7 years. Some said ceased; some said not	Fairly remote	North Wollo	Mostly Orthodox	Law being enforced; reduction but still some secret practice. Fear uncircumcised girls will face sexual problems when married
Kormargefia, near Debre Berhan	Amhara	Was 7 days; now secret and not always at the right time	Quite well connected	Amhara/ 5% Shewa Oromo	Orthodox	Law being enforced; practitioner stopped for fear of prosecution; reduction but some questioning. Some said it had never caused problems & uncircumcised lack self-esteem
Sirba, E Shewa	Oromiya	Age 3-8	Well connected	Shewa Oromo	Orthodox Christian	Common 10 years ago; ban, reduced due to campaign, fear of punishment; practitioner imprisoned 3 months then retrained. Now exceptional but still secret cases; older people disagreed with ban; no stigma mentioned
Girar, Gurage	SNNP	Was 8-10	Fairly remote	Gurage	Orthodox, Catholic, Protestant, Muslim	Strong govt/NGO/churches campaign including penalties - decreasing; uncircumcised girls no longer stigmatised. Some secret practice.
Aze Debo'a, Kembata	SNNP	12-14 severe form	Fairly connected	Kembata	Nearly all Protestants	Strong enforcement – circumciser nearby jailed for 18 months within 3 days; strong govt/NGO campaign; large nos of girls committed to marry without circumcision approaching age of marriage. Still stigma attached to uncircumcised and suspected secret practice.
Gara Godo, Wolayitta	SNNP	Was 10-15; now <10	Fairly remote	Wolayitta	Protestant 55%; Orthodox	Used to be ceremony with contributions; decreased due to ban and fear of legal measures. Case in wereda of family and circumciser imprisoned 2-3 years. Still stigma attached to uncircumcised and suspected secret practice.
Korodegaga	Oromiya	1 or 2 months before marriage	Remote	Arsi Oromo	Muslim	Case of local women arresting a family and circumciser about to act. Decreasing anyway – customary marriages declining in the face of voluntary abduction
Turufe	Oromiya	Oromo+southerners just before marriage; northerners a few days after birth	Very well connected	Arsi Oromo majority; Amhara; Tigrayans; Kembata; Wolayitta	Muslim; OC; Protestant	Strong campaign by wereda and NGOs; circumcisers condemned; some fined & imprisoned. Seemed to be a change; some secret practice especially by those from South.

In three Amhara Orthodox Christian communities, and among Amhara and Tigrayans in a community with people of mixed cultural origins, the norm had been to circumcise at around seven days old; all

four reported some secret practice. In one community people said there was no cultural pressure either to do it, or not do it.

In four of these communities circumcision took place some time before girls were deemed to be ready for sexual activity: in three before 10 and in one between 12 and 14. In the three in the Southern Region it had been an important rite of passage involving celebrations. In two of these NGOs were involved in the campaign against the ban and in one churches and community leaders were also involved. In this latter community some people said that stigma was no longer attached to the uncircumcised, though this was not the case in the other two Southern communities.

In the two Arsi communities young women had been circumcised just before marriage which usually took place by arrangement or following forced abduction. In one of them people said the practice had been declining as a result of the increase in marriage by voluntary abduction.

Where the ban was being enforced circumcisers and parents were afraid of being fined and imprisoned. Some were convinced by campaigns explaining the practice was harmful but others were not. Some responded by obeying the ban while others continued the practice secretly. In some places the practice was adapted to reduce detection and/or punishment; examples were taking the girl to another community, changes in the age when circumcision happened, and reducing the extent of the circumcision. There were signs of attitude change in many places, especially among girls and young women.

While local government educated people about the ban in six communities, there were no attempts at enforcement (Table 4).

Table 4: Female circumcision – ban not being enforced (6 communities)

Community	Region	Practice	Remote-ness	Local culture	Dominant religion	Ban and response
Dinki, N Shewa	Amhara	Before 7th day	Very remote	Argobba/ Amhara	Muslim 60%; OC 40%	General non-acceptance. Ban not implemented
Somodo, Jimma zone	Oromiya	Between 6 and 8	Well connected	Oromo	Muslim; Protestant minority	2010 wereda threatened practitioners fine 100 <i>birr</i> - no case. Still practised in secret but evidence of changing attitudes among young women
Adele Keke, E Harerghe	Oromiya	Between 8 and 12	Well connected	Oromo	Muslim	Strong education but no measures yet. Practised secretly; greatly reduced compared with past.
Oda Haro, W Shewa	Oromiya	Between 7 and 9 years old	Fairly remote	Shewa Oromo	Protestants 64%; Orthodox 25%; Muslim 10%	Ban contested and not enforced. Still considered v important and celebrated. Campaigns half-hearted.
Gelcha, E Shewa	Oromiya	Between 8 and 12	Fairly remote	Karrayu, Ittu, Somali	Customary Muslim influence	Govt ban but taboo for Karrayu girl not to be circumcised. Koran said to encourage it. Only a few willing to stop. Somali circumcision severe.
Do'oma	SNNP	Was at marriage now 7-15	Very remote	Gamo/ Wolayitta	Protestant – condemns it & punishments	Legal ban contested & not enforced. Trad practitioner resisted govt pressure. Used to be right thing to do; festival cost 600 <i>birr</i>

In five out of six of these places girls were circumcised between the ages of seven and fifteen. In some it was likely that some government officials supported the practice contributing to half-hearted campaigns. In two the practice was secret while in four this did not seem to be the case.

Reasons given for not abandoning the practice included the fear that uncircumcised girls would face sexual problems when married; uncircumcised females lacked self-esteem; the festival costing 600 *birr* used to be 'the right thing to do'; people had contributed to ceremonies for other families and were owed; the Koran encouraged it; and it had never caused any childbirth problems.

Looking for patterns in the practice of female circumcision

Table 5 summarises the data in Tables 2-4.

Table 5: Patterns of female circumcision practice in the WIDE3 communities

Community	Dominant religion	Region	Local culture	Remoteness	None	Ban enforced	Ban resisted
Geblen	Orthodox	Tigray	Tigray/Irob	Very remote	X		
Harresaw	Orthodox	Tigray	Tigray	Remote	X		
Oda Dawata	Muslim	Oromiya	Arssi Oromo+	Fairly connected	X		
Adado	Protestant	SNNP	Gedeo	Remote	X		
Luqa	Customary/Prot.	SNNP	Tsemai - pastoralist	Very remote	X		
Shumsheha	Orthodox	Amhara	North Wollo	Fairly remote		X	
Yetmen	Orthodox	Amhara	East Gojam	Fairly connected		X	
Kormargefia	Orthodox	Amhara	Amhara	Quite well connected		X	
Sirba	Orthodox	Oromiya	Shewa Oromo	Very well connected		X	
Korodegaga	Muslim	Oromiya	Arssi Oromo	Remote		X	
Turufe	Muslim	Oromiya	Arssi Oromo+	Very well connected		X	
Girar	Mixed Christian	SNNP	Gurage	Fairly remote		X	
Gara Godo	Mixed Christian	SNNP	Wolayitta	Fairly remote		X	
Aze Debo'a	Protestant	SNNP	Kembata	Fairly connected		X	
Dinki	Muslim 60%; OC	Amhara	Argobba 60; Amhara	Very remote			X
Oda Haro	Protestant	Oromiya	Shewa Oromo	Fairly remote			X
Gelcha	Customary/Muslim	Oromiya	Karrayu - pastoralist	Fairly remote			X
Somodo	Muslim	Oromiya	Jimma Oromo	Well connected			X
Adele Keke	Muslim	Oromiya	Harerghe Oromo	Well connected			X
Do'oma	Protestant	SNNP	Gamo 75%	Very remote			X

Table A1 in the Appendix compares community practices in each of the three types by remoteness, religion, local culture, Region and timing of the research. There are weak patterns related to remoteness, religion, and Region. There was no indication of changes between 2010 and 2013.

Of the five communities where circumcision was not practised or virtually stopped four were in remote areas. Isolation may have played a part in protecting the Gedeo and Tsemai communities from influences from communities which practised circumcision. The government ban was enforced in more better connected communities and fewer remoter communities than expected.

Considering religious differences the ban was not enforced in slightly more predominantly Muslim communities than expected. In the six predominantly Orthodox Christian communities (circumcision at 7 days) the practice had either ceased or there were signs the ban was being enforced. Protestantism was not associated with a difference one way or the other.

Turning to Regional and local cultural differences the ban was not enforced in four Oromiya communities (circumcision between 6 and 12) which was more than expected. They were scattered across West Shewa, Jimma, East Harerghe and East Shewa. One possibility is that the Oromiya Regional government had not been prioritising implementation of the law as much as other regions. On the other hand the practice had almost died out in one Arsi Oromo Community and the ban was being enforced in the other two, as it was in a Shewa Oromo community near Debre Zeit.

The ban was enforced in more Amhara communities than expected but not in the remote community with a Muslim majority. In the Southern Region the six communities were distributed across the three types roughly as expected. In the Kembata community the struggle between opposition and enforcement, involving very strong persuasion and punishments, was coming to a head as a cohort of girls who had promised not to co-operate was approaching marriage age. The experience in the east Tigrayan communities suggests that if a ban is imposed successfully for a while it might hold.

Policy discussion

While there were verbal campaigns against female circumcisions in all twenty communities Federal government policy was not being implemented equally across them; this seemed to relate more to cultural differences, including the local value put on female circumcision, than to Regional government policy implementation. Local cultural pressures on parents and girls were strongest in communities where the practice occurred before or early in puberty and had involved rite of passage

ceremonies. In communities where the practice was associated with customary marriages increase in partner choice and voluntary abduction had contributed to reductions. In communities where circumcision took place in infancy there seemed to be increasing acceptance the ban.

Where cultural support for the practice was strong local official enforcement of the ban was often half-hearted. Exemplar fines and prison sentences were generally effective in reducing the practice, although also had the consequence of driving it underground. A combination of law enforcement with a strong campaign of persuasion involving local cultural and religious leaders and NGOs seemed to have highly reduced the stigma previously associated with being uncircumcised in the Gurage community. Modernising forces increasing the independence and choices of girls in transition to adulthood had made a contribution to reducing the practice in some but not all communities. Conversely, in the Gamo community some girls were using their independence to choose to be circumcised secretly 'in the forest'.

In our sample the girls most vulnerable to harm from circumcision were found in communities where the practice took place before or in very early puberty. The cutting was particularly severe in the Kembata community and among the Somali sub-group residing in the mainly Karrayu community.

Rape of unmarried girls and young women in transition to adulthood

The issues

A male respondent from Harresaw in East Tigray said that in the past rape was common and viewed as 'heroic', which was likely to have been the case in many other rural communities. A female anthropologist who was raped by her Ethiopian field assistant in the 1970s and later wrote about it (Moreno, 1995) was told by the Ethiopian women in her research community that what had happened was normal and what women had to suffer (p183). Moreno concluded that '(t)he will to rape is impossible to comprehend for women, and the consequences of rape for the victim-survivor may be equally difficult to understand and empathise with for men (p186)'.

Rape of unmarried girls and young women can involve the transmission of STDs including HIV/AIDS, and unwanted pregnancy, which may be followed by customary abortion. It can lead to psychological trauma and social stigma and the loss of the chance to marry such that victims have the choice of saying nothing, withdrawing from society, or escaping to urban areas. I could not find any statistics on rape of girls and young women in Ethiopia but in the past it was a widely recognised risk for girls on their way to school or out fetching water or wood or making dungcakes. Reduction in distances to schools and waterpoints in recent years has reduced the risk.

Article 620 of the 2004 Revised Criminal Code of Ethiopia states that: "*Whoever compels a woman to submit to sexual intercourse outside wedlock, whether by the use of violence or grave intimidation, or after having rendered her unconscious or incapable of resistance, is punishable with rigorous imprisonment from five years to fifteen years*" (FDRE 2005: 361). Where the crime is committed on a young woman between thirteen and eighteen years of age the punishment should be rigorous imprisonment from five to twenty years.

Comparison of the communities according to the risk of rape

Responses about rape did not always refer to the age of the victims, so all the data on rape is included here. It had reduced everywhere, although there were variations in incidence across the sites. In one type of community rape was still a problem (11 communities) and local government had not been taking strong action against it (Table 6). In nine communities there were reported reductions often due to fear of punishment (Table 7)

Table 6: Rape still a problem – 11 communities

Community	Region	Remote-ness	Rape	Local culture	Dominant religion
Geblen	Tigray	Very remote	Frequent; dealt with by elders	Tigray/ Irob	Orthodox
Dinki	Amhara	Very remote	Usually dealt with by elders; poor and FHH could do nothing	Argobba/ Amhara	Muslim/OC
Kormargefia	Amhara	Quite connected	3 recent cases; 1 raped twice used endod for abortion	Amhara/ Oromo 5%	Orthodox
Shumsheha	Amhara	Fairly remote	Better protection but two recent cases by HIV men; girls walking to secondary school in Lalibela vulnerable	Amhara; few Muslims	Orthodox
Yetmen	Amhara	Fairly connected	A few cases when girls collecting dungcakes; youths 15. Case of poor woman heading hh raped and insulted by married neighbour – has had 2 children – not reported.	Gojjam	Orthodox
Oda Haro	Oromiya	Fairly remote	Decline but no serious action when it happens; taboo for girl to admit it; common in town houses rented by young men going to school. Wereda requires 3 or more witnesses plus medical report	Shewa Oromo	Protestant; OC; Muslims
Korodegaga	Oromiya	Remote	Occasional rapes. Comment that men now consider rape & abduction as crimes and if encountered they were ready to interfere and report the perpetrators although some women heading households said they had been raped..	Arsi	Muslim
Turufe	Oromiya	Well connected	Domestic servants and their daughters at risk of abuse – do not report cases	Arsi	Muslim
Girar	SNNP	Fairly remote	Not widespread but some cases – one of a 5 year old girl; Poor housemaid raped not supported by employer to report it. Girls exposing sexual abuse can be excluded – since most are poor they stay silent.	Gurage	Mixed Christian; some Muslims
Adado	SNNP	Remote	Improving due to laws, penalties, church (sin), urban influences but still cases. Need evidence for wereda court. Some police and others prevent criminal getting proper punishment – lie.	Gedeo	Protestant
Luqa	SNNP	Very remote	Rape including of married women still happens; less common due to fear of govt and customary punishments	Tsemai	Traditional; Protestant

In a number of these communities incidence of rape had reduced but in all implementation of the law was poor. Young rape victims identified included girls walking long distances to secondary school, girls collecting dungcakes, daughters of domestic servants and victims of young men living in rented town houses to go to school. Other perpetrators included men infected with HIV, and youths as young as 15. Other victims were poor women, women heading households and domestic servants who did not report it, and in one community married women at home. There were a signs of a number of barriers to justice: it was taboo for a girl to admit it; girls admitting it were likely to be excluded; cases were dealt with by elders; the wereda required three or more witnesses plus a medical report; the health centre gave incorrect evidence to the courts, vulnerable women did not report cases.

Table 7: Reduction in rape – 9 communities

Community	Region	Remote-ness	Rape	Local culture	Dominant religion
Harresaw	Tigray	Remote	Was heroic and common; now harsh sentences 15-25 years so cases very rare.	Tigrayan	Orthodox
Oda Dawata	Oromiya	Fairly connected	Teenagers respondents said – no rape; could walk around without feeling harassed. Another respondent - little justice in courts – corruption, need for evidence from health service – some cases of incorrect evidence – women knew they would not get justice so didn't report	Arsi	Muslim majority; Orthodox
Sirba	Oromiya	Very well connected	Many offenders imprisoned for 5-6 years; rape much less common	Shewa Oromo, East Shewa	Orthodox

Community	Region	Remote-ness	Rape	Local culture	Dominant religion
Gelcha	Oromiya	Remote	Rape is culturally taboo and hidden	Karrayu majority	Traditional with Muslim influence
Adele Keke	Oromiya	Well connected	Rape reduced	East Harerghe Oromo	Muslim
Somodo	Oromiya	Well connected	Rape reduced; if it happens parents try to get the man to man marry their daughter and only report it if this fails	Jimma Oromo; minority Yem	Muslim; Protestant minority
Gara Godo	SNNP	Fairly remote	Recently a crime; very few random events by young males	Wolayita	Protestant 55%; Orthodox 40%; Catholic 5%
Aze Debo'a	SNNP	Fairly connected	Elders no longer allowed to handle cases.	Kembata	Protestant
Do'oma	SNNP	Very remote	Reduced due to government interventions	Gamo	Protestant

In five of the nine communities respondents linked the reduction in rape to government interventions. In pastoralist Gelcha rape was customarily taboo.

Looking for patterns in the incidence of rape

Table 8 summarises the data in Tables 6 and 7.

Table 8: Patterns of rape in the WIDE3 communities

Community	Region	Dominant religion	Local culture	Remoteness	Still a problem	Reducing
Geblen	Tigray	Orthodox	Tigray/Irob	Very remote	X	
Shumsheha	Amhara	Orthodox	North Wollo	Fairly remote	X	
Kormargefia	Amhara	Orthodox	Amhara	Quite well connected	X	
Yetmen	Amhara	Orthodox	East Gojam	Fairly connected	X	
Dinki	Amhara	Muslim 60%; OC	Argobba 60; Amhara	Very remote	X	
Oda Haro	Oromiya	Protestant	Shewa Oromo	Fairly remote	X	
Korodegaga	Oromiya	Muslim	Arssi Oromo	Remote	X	
Turufe	Oromiya	Muslim	Arssi Oromo+	Very well connected	X	
Adado	SNNP	Protestant	Gedeo	Remote	X	
Girar	SNNP	Mixed Christian	Gurage	Fairly remote	X	
Luqa	SNNP	Customary/Prot.	Tsemay - pastoralist	Very remote	X	
Harresaw	Tigray	Orthodox	Tigray	Remote		X
Sirba	Oromiya	Orthodox	Shewa Oromo	Very well connected		X
Oda Dawata	Oromiya	Muslim	Arssi Oromo+	Fairly connected		X
Adele Keke	Oromiya	Muslim	Harerghe Oromo	Well connected		X
Somodo	Oromiya	Muslim	Jimma Oromo	Well connected		X
Gelcha	Oromiya	Customary/Muslim	Karrayu - pastoralist	Fairly remote		X
Gara Godo	SNNP	Protestant	Wolayitta	Fairly remote		X
Aze Debo'a	SNNP	Protestant	Kembata	Fairly connected		X
Do'oma	SNNP	Protestant	Gamo	Very remote		X

Table A2 in the Appendix sorts community incidence of rape by remoteness, religion, local culture, Region and timing of the research. There are weak patterns involving remoteness, Region and local culture.

Of the eleven communities where rape was still said to be a problem eight were in remote areas, while this was the case in only three of the eight better connected. Remoteness may have made it harder for wereda officials to deal with crimes such as rape and more likely that they were left to elders to deal with. There were hints of corruption involving police, courts and/or health centres.

Turning to Regional and local cultural differences there seemed to be no connection between rape incidence and Region in Tigray and the Southern Region. But rape was still a problem in all four Amhara communities and less of a problem than expected in Oromiya Region communities. The

three where problems were still reported included a community in the predominantly Protestant community in West Shewa and two Arsi Oromo communities though in these vulnerable women rather than young females were at risk.

In none of the communities researched in early 2010 was the law being enforced, while in those researched in late 2011 it was being enforced in 6 out of 8. Increased pressure from above to enforce the law in Tigray, Oromiya and SNNP Regions may have played a role. However, the law was not being enforced in three of the communities researched in 2013.

Policy discussion

In the sample the main rape risks to unmarried girls and young women between 2010 and 2013 came from walking or working some distance from home, from teenage boys of fifteen or so, in town houses rented by young males attending school, and in one community from men infected with HIV/AIDS who may have believed that sex with a virgin would cure them. Poor girls and those with no male family member to protect them were most at risk.

Given the stigma attached to unmarried girls who have been raped it is likely that it is more common than suggested in the WIDE3 data. The 2004 revised criminal code (FDRE 2005) was not being properly implemented in many of the WIDE3 communities, notably not in any of those in the Amhara Region; in many cases male officials did not seem committed to bringing rapists to justice. For example, the requirement of three witnesses plus a medical report for a rape charge is clearly an obstruction to justice, and there were reports of corruption. There was no evidence of rapists suffering stigma.

An observer in Korodegaga (Arsi) claimed that, as a result of education campaigns, in 2010 many men were willing to act if they came across a rape in progress. A strong campaign to teach men and boys they should intervene to stop rapes and report the perpetrators, alongside implementation of Criminal Code punishments for rape of five to twenty years imprisonment would make a difference.

The investigation of rape cases by wereda police and other officials in more remote rural communities depends on access to transport and involves more resource and time costs than in more connected places, suggesting the need for clear instructions on how kebele officials and militia should act when cases were reported, including immediate reporting to the wereda.

There was little evidence of interventions to help rape victims. These should include easy access to modern abortion if pregnancy results, treatment for STDs and psychological trauma, and community education to eliminate stigma attached to those who have been raped.

Forced abduction

The issues

Forced abduction involves kidnapping accompanied by rape whose purpose is to force a girl and her family to accept a marriage. Reasons for it include anticipated refusal of consent by the parents or girl and/or avoidance of excessive wedding ceremony expenses and brideprice. In some Oromo communities it was described as an optional marriage form in the WIDE1 research in 1994/5. Consequences may include an unhappy marriage, unwanted pregnancy, physical and psychological consequences for the girl, and/or discontinuation of schooling (Ethiopia Ministry of Health, n.d.: 48). The 2004 rape laws described above should apply in cases of forced abduction involving rape.

Comparison of the communities according to the risk of forced abduction

The data from the WIDE communities in 2010-13 shows that, though forced abduction had been declining nearly everywhere, it was still seen as a problem in eight communities (Table 9). In two communities it had reduced due to fear of punishment (Table 10) and in the remaining ten communities it was no longer seen as a problem (Table 11).

Table 9: Forced abduction still seen as a problem – 8 communities

Community	Region	Remote-ness	Abduction	Local culture	Dominant religion
Geblen	Tigray	Very remote	Law made some difference; still elders	Tigray/ Irob	Orthodox
Shumsheha	Amhara	Fairly remote	Declining	Amhara; few Muslims	Orthodox
Dinki	Amhara	Very remote	Still cases; negotiated by elders	Argobba/ Amhara	Muslim/OC
Kormargefia	Amhara	Quite connected	Constant threat; most girls worried	Amhara/ Oromo 5%	Orthodox
Sirba	Oromiya	Very well connected	Shift to voluntary abduction; forced abduction greatly reduced but still a risk; elders refusing to negotiate in cases.	Shewa Oromo, East Shewa	Orthodox
Oda Haro	Oromiya	Fairly remote	Crime; increase in voluntary; forced less than in past; rejected boyfriend may do it	Shewa Oromo	Protestant; OC; Muslims
Adado	SNNP	Remote	Two cases; one married 50 yr-old as second wife; other went to court but persuaded to say she consented	Gedeo	Protestant
Luqa	SNNP	Very remote	Woman wereda official said forced abduction was common; low enforcement of law	Tsemai	Traditional; Protestant

In two Oromo communities where forced abduction had been an accepted form of marriage the shift to voluntary abduction had reduced the risk though it had not gone away completely. Elsewhere forced abduction was a way of getting a wife without going through the normal procedures. In one Amhara and one pastoralist community the threat was high. In another Amhara and one Tigrayan community cases were still negotiated by elders rather than dealt with by wereda police and courts. In the Gedeo community there was a case of a victim who went to court but was persuaded to say she had consented.

Table 10: Forced abduction reduced due to fear of punishment – 2 communities

Community	Region	Remote-ness	Abduction	Local culture	Dominant religion
Adele Keke	Oromiya	Well connected	Not common now due to fear of punishment; example of abductor in wereda jailed for 3 years	East Harerghe Oromo	Muslim
Aze Debo'a	SNNP	Fairly connected	Wereda court ruling of 15 years in prison significant effect. NGO significant role in taking offenders to court	Kembata	Protestant

In two communities the wereda had prosecuted and imprisoned abductors with a deterrent effect. In one an NGO had been involved in taking offenders to court.

Table 11: Forced abduction no longer seen as a problem – 10 communities

Community	Region	Remote-ness	Abduction	Local culture	Dominant religion
Harresaw	Tigray	Remote	No longer an issue – now voluntary abduction	Tigrayan	Orthodox
Yetmen	Amhara	Fairly connected	None	Gojjam	Orthodox
Oda Dawata	Oromiya	Fairly connected	Teenagers - no forced abduction	Arsi	Muslim majority; Orthodox
Korodegaga	Oromiya	Remote	Forced abduction no longer existed	Arsi	Muslim
Turufe	Oromiya	Well connected	Used to be a cultural form of marriage; outlawed by Family Law - not a serious threat	Arsi	Muslim
Gelcha	Oromiya	Remote	Voluntary abduction; forced abduction not considered problem by wereda	Karrayu majority	Traditional with Muslim influence
Somodo	Oromiya	Well connected	Shift to voluntary abduction; teenagers said no forced abduction now	Jimma Oromo; minority Yem	Muslim; Protestant minority
Girar	SNNP	Fairly remote	Not mentioned	Gurage	Mixed Christian; some Muslims

Community	Region	Remoteness	Abduction	Local culture	Dominant religion
Gara Godo	SNNP	Fairly remote	Very rare	Wolayita	Protestant 55%; Orthodox 40%; Catholic 5%
Do'oma	SNNP	Very remote	In past those resisting marriage could be abducted and raped; then couldn't marry anyone else so set up house with abductor. Starting 10 yrs ago girls can choose husbands. 1 case in last 6 months; abductor still in prison.	Gamo	Protestant

In five communities forced abduction was non-existent or not mentioned (1) and in one very rare. In four communities it had been mostly replaced by voluntary abduction or girls' choice.

Looking for patterns in forced abduction

Table 12 summarises the data in Tables 9-11.

Table 12: Patterns of forced abduction in the WIDE3 communities

Community	Dominant religion	Region	Local culture	Remoteness	Still a problem	Punishments	Reduced
Geblen	Orthodox	Tigray	Tigray/Irob	Very remote	X		
Shumsheha	Orthodox	Amhara	North Wollo	Fairly remote	X		
Kormargefia	Orthodox	Amhara	Amhara	Quite well connected	X		
Sirba	Orthodox	Oromiya	Shewa Oromo	Very well connected	X		
Oda Haro	Protestant	Oromiya	Shewa Oromo	Fairly remote	X		
Adado	Protestant	SNNP	Gedeo	Remote	X		
Dinki	Muslim 60%; OC	Amhara	Argobba 60; Amhara	Very remote	X		
Luqa	Customary/Prot.	SNNP	Tsemay - pastoralist	Very remote	X		
Adele Keke	Muslim	Oromiya	Hareghe Oromo	Well connected		X	
Aze Debo'a	Protestant	SNNP	Kembata	Fairly connected		X	
Harresaw	Orthodox	Tigray	Tigray	Remote			X
Yetmen	Orthodox	Amhara	East Gojam	Fairly connected			X
Girar	Mixed Christian	SNNP	Gurage	Fairly remote			X
Do'oma	Protestant	SNNP	Gamo	Very remote			X
Gara Godo	Protestant	SNNP	Wolayitta	Fairly remote			X
Korodegaga	Muslim	Oromiya	Arssi Oromo	Remote			X
Oda Dawata	Muslim	Oromiya	Arssi Oromo+	Fairly connected			X
Turufe	Muslim	Oromiya	Arssi Oromo+	Very well connected			X
Somodo	Muslim	Oromiya	Jimma Oromo	Well connected			X
Gelcha	Customary/Muslim	Oromiya	Karrayu - pastoralist	Fairly remote			X

Table A2 in the Appendix sorts community incidence of forced abduction by remoteness, religion, local culture, Region and timing of the research. There are weak patterns related to remoteness, religion, and Region/local culture. There was no reduction in risks between 2010 and 2013 that can be related to improved policy implementation; in four of the six communities researched in 2013 forced abduction was still a problem, compared with only two out of six in 2010.

Of the eight communities where forced abduction was still said to be a problem six were in remote areas, while this was the case in only two of the eight better connected. As with rape unrelated to marriage remoteness may have made it harder for wereda officials to deal with the crime.

Forced abduction was more likely to happen in predominantly Orthodox Christian communities and in the Amhara Region (three out of four communities) than in Muslim communities and in the Oromiya Region (two out of eight communities – both Shewa Oromo). In many Oromiya areas forced abduction had been a customary way to get married without paying bridewealth; in these communities and in Do'oma (SNNP) forced abduction had declined as voluntary abduction with the girl's consent had increased. Protestantism, and the Tigray and Southern Region were not associated with forced abduction incidence.

Table 13: Comparison of rape and forced abduction problems in 12 communities with issues

Community	Region	Rape a problem	Forced abduction a problem
Geblen	Tigray	Frequent; dealt with by elders	Law made some difference; still elders
Dinki	Amhara	Usually dealt with by elders; poor and FHH could do nothing	Still cases; negotiated by elders
Kormargefia	Amhara	3 recent cases; 1 raped twice used endof for abortion	Constant threat; most girls worried
Shumsheha	Amhara	Better protection but two recent cases by HIV men; girls walking to secondary school in Lalibela vulnerable	Declining
Oda Haro	Oromiya	Decline but no serious action when it happens; taboo for girl to admit it; common in town houses rented by young men going to school. Wereda requires 3 or more witnesses plus medical report	Crime; increase in voluntary; forced less than in past; rejected boyfriend may do it
Adado	SNNP	Improving due to laws, penalties, church (sin), urban influences but still cases	Two cases; one married 50 yr-old as second wife; other went to court but persuaded to say she consented
Luqa	SNNP	Rape including of married women still happens; less common due to fear of govt and customary punishments	Woman wereda official said forced abduction was common; low enforcement of law
Korodegaga	Oromiya	Occasional rapes; some women heading households said they had been raped	(Not a problem)
Turufe	Oromiya	Domestic servants and their daughters at risk of abuse – do not report cases	(Not a problem)
Yetmen	Amhara	A few cases when girls collecting dungcakes; youths 15. Case of poor woman heading hh raped and insulted by married neighbour – has had 2 children – not reported.	(Not a problem)
Girar	SNNP	Not widespread but some cases – one of a 5 year old girl; Poor housemaid raped not supported by employer to report it. Girls exposing sexual abuse can be excluded – since most are poor they stay silent.	(Not a problem)
Sirba	Oromiya	(Rape reduced)	Shift to voluntary abduction; forced abduction greatly reduced but still a risk; elders refusing to negotiate in cases.

Table 13 shows that in seven of the eight communities where forced abduction was still a problem this was also true of rape. In another four communities where rape was still a problem forced abduction was not. In one the opposite was said to be the case.

Policy discussion

Forced abduction involves rape with the purpose of getting a wife, sometimes not the first one, and the earlier policy discussion about rape applies. There is the additional factor that pressure is put on abducted girls and young women to marry their abductors to avoid family stigma and the prospect that no other man might be willing to marry them. The interventions to help rape victims suggested above should be supplemented by special support from women affairs officials and schools to allow abducted women to reject unwanted marriages and pursue opportunities in education (see the chapter on education) and/or income-generating activities (see the chapter on economic participation).

It is not clear why forced abduction is still a possible route to marriage in eight WIDE3 communities which seem to have little else in common; this would be an interesting question to follow-up. In seven out of eight communities where there were cases of forced abduction there was also rape of different kinds of female including young women. In most communities with low risks of forced abduction but risks of rape the greatest risk was to vulnerable adult women. This suggests a distinction between cultures where the rape of young women is not acceptable, and those where it is still condoned to some extent.

Early Marriage

The issues

Early marriage is thought to ensure virginity and in some communities girls not married young may be seen as unattractive or ill-behaved bringing shame on the family. It may lead to premature pregnancy with increased risks of maternal and neo-natal mortality, vaginal tears and fistulas, nutritional deficiencies for mother and child, risks of premature birth and low birthweight (Ethiopia Ministry of Health, n.d.: 46). In Ethiopia marriage under the age of 18 is illegal and is often referred

to as ‘early marriage’. However, the risks associated with marriage involving sexual relations at 17 or even 16 are considerably less than those faced by girls of 13 or 14. The issue is complicated by the fact that girls reach sexual maturity at different ages.

‘Dividing child and early marriage into age brackets is somewhat artificial since often a girl’s physical maturity, notably whether a girl has developed breasts, and reached puberty are what is often what is locally considered relevant. However, the distinction between child marriage and adolescent marriage, and within the latter early teen (13-15), mid teen (16-17) and late teen marriage (18-19) is useful, especially since the extent of girls’ involvement and agency is related to their increasing age’ (Pankhurst, this volume).

Comparison of the communities according to the risks of early marriage.

In all of the communities some girls were reportedly getting married before they were 18. There were serious attempts to enforce the under-age marriage ban in only three communities (Table 14). In 12 communities marriage from 15 was culturally accepted but there was no enforcement of the under-18 ban (Table 15). In five communities some girls of less than 15 were marrying but again there was no enforcement of the ban.

Table 14: Attempts to enforce the ban on under-18 marriage (3 communities)

Community	Region	Remote-ness	Government action	Community behaviour	Local culture	Dominant religion
Harresaw	Tigray	Remote	Very early marriage said to be abandoned pre-1991 under TPLF; and now implementing under-18 law	Compliance with the law was related to an increasing number of girls pursuing education to higher levels although there were also reports of some parents lying about daughters’ ages	Tigrayan	Orthodox
Geblen	Tigray	Very remote	Fines of 800 birr and 6 years imprisonment (wereda said) Religious leaders active	Parents fear unwanted pregnancy so lie about daughter’s age General trend to marry later – difficulties in establishing independent household; migration	Tigray/Irob	Orthodox
Yetmen	Amhara	Fairly connected	Punished by 8 months; implementation difficult; girls sent to Bichena HC for age exam – some sending older daughters – now need photos	(1) Family agreements that small children will marry (2) Marriage < 18 still happening secretly; some improvement due to lack of land & higher levels of education	Gojjam	Orthodox

In three communities (Table 14) wereda officials were trying to enforce the ban with the consequence that some parents lied about their daughters’ ages.

In the WIDE community in East Gojjam there was a type of customary marriage whereby two families made a formal agreement which ‘married’ their small children, maybe as young as three or four, creating a set of mutual obligations between the families. In some cases the little girl went to live in the boy’s household, providing domestic labour for the family, while in others she stayed at home until considered mature enough for adult marriage. We did not get any information about the extent of this kind of marriage in 2010.

Table 15: Marriage from 15 and the ban not implemented (12 communities)

Community	Region	Remote-ness	Government action	Community behaviour	Local culture	Dominant religion
Kormargefia	Amhara	Quite connected	Awareness-raising; law not enforced	Education drop-outs 15-16; others 20+ Girls increasingly consulted; both lie about age to kebele if <18	Amhara/Oromo 5%	Orthodox
Sirba	Oromiya	Very well connected	Awareness-raising; little commitment to implement law – challenge is lack of birth certificates	Many people believe that 16 year-olds are old enough to get married; delays by those in education	Shewa Oromo, East Shewa	Orthodox

Community	Region	Remote-ness	Government action	Community behaviour	Local culture	Dominant religion
Somodo	Oromiya	Well connected	Wereda not enforcing law – difficulty: young women and men interacting earlier; parental fears of premarital pregnancy	15-17 but incidence reduced: education; need for income; female migration; less parental influence on choices	Jimma Oromo; minority Yem	Muslim; Protestant minority
Oda Dawata	Oromiya	Fairly connected	Wereda – attitudes make it difficult to enforce the law as community does not inform when early marriages arranged	15 but less common: rights of women, education; no punishment	Arsi	Muslim majority; Orthodox
Oda Haro	Oromiya	Fairly remote	Education	15; reduction - education; mutual consent. Some choose (poorer): struggling at school; escape domestic work at home; economic necessity; or abduction	Shewa Oromo	Protestant; OC; Muslims
Korodegaga	Oromiya	Remote	Wereda and kebele training	People said early marriage not practised by Oromo tho may be <18; more couples choosing partners	Arsi	Muslim
Turufe	Oromiya	Well connected	Education	People said early marriage not practised by Oromo tho may be <18;	Arsi	Muslim
Aze Debo'a	SNNP	Fairly connected	Wereda official said families do not allow girls to marry < 18	20 used to the 'right age'; under urban influences some earlier now; some later – education; income	Kembata	Protestant
Girar	SNNP	Fairly remote	Wereda officials said it was not such a challenge as some other places in the country	Fewer early marriages; more adolescents going to secondary school	Gurage	Mixed Christian; some Muslims
Adado	SNNP	Remote	Legislation made people aware but no prosecutions	<16 very rare; 16+ if not doing well at education; if doing well 22+ If a case taken to court and man jailed no-one will want to marry the woman	Gedeo	Protestant
Gara Godo	SNNP	Fairly remote	Underage marriage introduced in many meetings as a serious crime	<18 (16 or so) still common	Wolayita	Protestant 55%; Orthodox 40%; Catholic 5%
Do'oma	SNNP	Very remote	No legal measures	15 but girls resisting even when parents push them to marry at 17-20 - more interested in education & training. Poor who can't afford education costs and those with hostile stepmothers may marry early	Gamo	Protestant

In twelve communities people said that the minimum marriage age was fifteen but, although there was awareness-raising about the illegality of under-18 marriage, the law was not being enforced. In many of these communities the number of girls marrying at this age was diminishing anyway due to growing participation in education and income-generating activities. In one community girls continuing in education were reportedly resisting parental pressures to marry even at 17-20. In another officials said it was difficult to enforce the law without birth certificates.

Table 16: Marriage before 15 possible and ban not enforced (5 communities)

Community	Region	Remote-ness	Government action	Community behaviour	Local culture	Dominant religion
Dinki	Amhara	Very remote	Awareness-raising; law not enforced	Norm from about 15 but some younger; parents want to avoid abduction & pregnancy; lie re age Recently some young people choosing partners	Argobba/ Amhara	Muslim/ OC

Community	Region	Remote-ness	Government action	Community behaviour	Local culture	Dominant religion
Shumsheha	Amhara	Fairly remote	Wereda said punishment fine and imprisonment; no case reported. Drs age examination inaccurate	9-10 in past; underage marriage still happens; parents don't think it is the government's business. Suggestion of 14 as girls from this age may have sexual relations and children	Amhara; few Muslims	Orthodox
Adele Keke	Oromiya	Well connected	Little commitment to implement law	Occasional early marriage at 13; usually 15-16 + – gone down as girls grow faster – maybe diet; girls resist the law	East Harerghe Oromo	Muslim
Gelcha	Oromiya	Remote	Government training – legal age of 18 and girls' consent	12-15; parents feared girls not married by 15 would become a burden; pretence at accepting law Fewer nos due to education	Karrayu majority	Traditional with Muslim influence
Luqa	SNNP	Very remote	Government opposes itself and allows couples under 18 to marry saying it is their democratic right	Girl mature enough at 12; some marry at 12-13; some boys 15-16; parents resist as young married couple can be a burden	Tsemai	Traditional; Protestant

In five communities girls younger than fifteen were marrying with little government action apart from awareness-raising (Table 16). In one Amhara community people said that girls as young as nine had married in the past; they suggested a minimum marriage age of fourteen since at this age some girls were sexually active and getting pregnant. In the two pastoralist communities girls of 12 were said to be mature enough to marry and in the East Harerghe site girls of thirteen occasionally got married.

In most communities average ages of marriage were rising as opportunities for education and income-generation activities, and lack of land, increasingly provided options other than marriage at the customary time. However, under-18 marriage was still common and enforcement of the law rare. There was a general belief that it was acceptable for a girl who was sexually mature and potentially sexually active to get married. A minimum marriage age of 18 was thought to be too low since sexual maturity could be reached by 16 or even earlier and better diets were said to be reducing the age of maturity. Parents were worried about potential pre-marital pregnancies and some did not think marriage age was the government's business. There were no cases anywhere of fines or imprisonment, though there were cases of the Women's Affairs office stopping underage marriage of girls in education, often on the grounds that the girl wanted to continue her education rather than that she was legally underage. In two Amhara communities there were age inspections, but these did not seem to have been effective in stopping the practice.

In a number of communities people said that education drop-outs would marry at 15 or 16 while those pursuing education might delay until 20 or older. In others there was a general trend to marry later as young people had difficulties in establishing independent households due to lack of land and restricted economic opportunities and were increasingly resorting to migration (for more see the chapter on migration). Reasons given by respondents why under 18s got married included personal choice, lack of success at school or because they were unable to afford secondary school costs, economic necessity, following abduction and to escape onerous domestic responsibilities at home or an 'unpleasant stepmother'. Some rich girls were 'married off' by parents.

Looking for patterns in early marriage

Table 17 summarises the data in Tables 14-16.

Table 17: Patterns of early marriage in the WIDE3 communities

Community	Dominant religion	Region	Local culture	Remoteness	Ban 'enforced'	15+	<15
Harresaw	Orthodox	Tigray	Tigray	Remote	X		
Geblen	Orthodox	Tigray	Tigray/Irob	Very remote	X		
Yetmen	Orthodox	Amhara	East Gojam	Fairly connected	X		
Kormargefia	Orthodox	Amhara	Amhara	Quite well connected		X	
Sirba	Orthodox	Oromiya	Shewa Oromo	Very well connected		X	
Oda Haro	Protestant	Oromiya	Shewa Oromo	Fairly remote		X	
Korodegaga	Muslim	Oromiya	Arssi Oromo	Remote		X	
Oda Dawata	Muslim	Oromiya	Arssi Oromo+	Fairly connected		X	
Turufe	Muslim	Oromiya	Arssi Oromo+	Very well connected		X	
Somodo	Muslim	Oromiya	Jimma Oromo	Well connected		X	
Aze Debo'a	Protestant	SNNP	Kembata	Fairly connected		X	
Girar	Mixed Christian	SNNP	Gurage	Fairly remote		X	
Do'oma	Protestant	SNNP	Gamo 75%	Very remote		X	
Gara Godo	Mixed Christian	SNNP	Wolayitta	Fairly remote		X	
Adado	Protestant	SNNP	Gedeo	Remote		X	
Shumsheha	Orthodox	Amhara	North Wollo	Fairly remote			X
Dinki	Muslim 60%; OC	Amhara	Argobba 60; Amhara	Very remote			X
Adele Keke	Muslim	Oromiya	Harerghe Oromo	Well connected			X
Gelcha	Customary/Muslim	Oromiya	Karrayu - pastoralist	Fairly remote			X
Luqa	Customary/Prot.	SNNP	Tsemay - pastoralist	Very remote			X

Table A4 in the Appendix sorts marriage age practices in each of the three types (attempts to enforce the ban; marriage from 15 & ban not enforced; marriage <15 and ban not enforced) by remoteness, religion, local culture, Region and timing of the research.

There are weak patterns related to religion and Region/local culture. Attempts to enforce the ban with some impact were only found in Orthodox Christian communities (3), while in all six predominantly Protestant/mixed Christian communities marriage was from 15. Two of the five communities where marriage under 15 was accepted were in pastoralist communities where religious beliefs were predominantly traditional.

The weredas working on the ban were in Tigray (2) and Amhara (1). The communities where girls under 15 were marrying were from all regions except Tigray.

Policy discussion

While the federal government ban on marriage of girls under 18 was not being implemented, increasing education and income-generating activities and independence from family among the under-18s had encouraged an increase in the average age of marriage in most communities. The leading policy concerns are the girls in some communities who are marrying below the age of 15 with no effective government action, and the belief in many other communities that 15 is an acceptable age of marriage.

There is a worry that the very high risks associated with marriage under 16, which increase as the age falls, are being ignored partly because residents have not accepted the edict that all under-18 marriage is harmful. The Government might consider a legal amendment allowing 16 and 17 year olds to marry with special consent (as happens in all European countries, the US, Canada, and many other countries). The ban on marriage under-16 could then be pursued more easily as scarce resources could be focused on child and early-teen marriage while community acceptance of the ban should increase. Another point to consider is that when laws are implemented nowhere the law generally falls into disrepute.

One way to reduce parental fears of pregnancy would be a campaign to persuade community opinion leaders that allowing unmarried girls access to contraception is preferable to pregnancy outside marriage and customary abortions. Effective advice from Health Extension Workers to newly-married girls that they should use contraception to postpone their first pregnancy for one or more years would reduce the pregnancy risks associated with early marriage. In the longer-term institutionalisation of birth certificates would make ban implementation easier.

Pregnancy outside marriage, contraception and abortions

The issues

Pregnancies before marriage can lead to abortions, the end of formal education, unwanted marriages, and/or exclusion from the community. Such pregnancies can be reduced if young unmarried females have easy access to contraception or the emergency 'morning after' pill. A pregnant girl without a stable relationship may seek a customary abortion to avoid dropping out of school, or through fear of not being able to support herself and child, or of social condemnation.

A young woman who has an abortion may face several negative consequences, including haemorrhage, infection, injury to her reproductive organs, intestinal perforation (if metallic or sharp materials are used), and toxic reactions to substances or drugs used to induce abortion. These complications may result in infertility or even death. A study in north Ethiopia in the year 2001 showed that aborting adolescents had the following post-abortion complications: anaemia 45%, shock 16%, genital tract infection 21%, injury 9%, incomplete evacuation 2%, peritonitis 6%, and renal failure 0.7% (Ethiopian Ministry of Health, n.d.: 25). The 2004 Criminal Code (FDRE, 2005) permits abortion in a number of circumstances, including for minors who are physically or psychologically unprepared to raise a child, but modern abortion is expensive.

Comparison of the communities according to responses to pregnancy outside marriage

Among the fifteen communities with data on pregnancy outside marriage there were two types. In six communities unmarried mothers could stay in the community with their babies (Table 18). In ten communities pregnancy outside marriage was 'taboo' and linked with abortions or exit from the community (Table 19). The tables also contain information on abortions and access to contraception by young unmarried females. The issue was not asked about or mentioned in five communities though in two information was volunteered on unmarried females' access to contraception and in one on customary abortion. Pregnancy outside marriage was a growing problem for girls, particularly those attending school.

Table 18: Unmarried mothers and babies could stay in the community¹⁷ – 6 communities

Community	Region	Remote-ness/ religion	Responses to pregnancy outside marriage	Abortions	Contraception for unmarried females
Harresaw	Tigray	Remote Orthodox	Unmarried mothers can live in the community. Sometimes adolescent girls get into an unwanted pregnancy – go for abortion.	Not acceptable in community; modern service in towns	Contraception access reducing pregnancy outside marriage.
Shumsheha	Amhara	Fairly remote Orthodox Christian	Many young people having children out of wedlock – responsibility usually falls on mother as young men are not independent before marriage.	Mostly high school students visit traditional practitioners; some die but no recorded data; modern service Lalibela hospital; wereda recommending training re emergency pills	HEW said about 30 girls 14-18 were using injections as pills were not easy to hide. Most male teenagers used condoms taking 12-24 at a time to give to less confident
Kormargefia	Amhara	Quite connected Orthodox	May keep child; abortions; one gave birth alone and threw it in a deep pond.	Many get endod from nearby kebeles; modern service in towns	Available in Debre Berhan

¹⁷ This did not mean there was no stigma attached

Community	Region	Remoteness/ religion	Responses to pregnancy outside marriage	Abortions	Contraception for unmarried females
Oda Dawata	Oromiya	Fairly connected Muslim majority/ Orthodox	Some young females had child and lived with parents. Seen as a growing problem for young girls; made future difficult as hard to find a partner	Very taboo; most young girls had not heard of one	Unmarried get them in towns
Sirba	Oromiya	Very well connected Orthodox	Most who end up with unexpected pregnancies give birth and stay with family.	Debre Zeit hospital or private clinics for those with money	Many young people don't use – fear HEW will tell their parents; some buy in Debre Zeit; condom dispenser in Youth Centre
Turufe	Oromiya	Well connected Muslim+	Case of girl dropping out of school	Some use traditional medicines; some go to individuals in Shashemene	Young single women did not ask Health Promoters for them; but available in Shashemene

In the six communities where unmarried mothers and their children could stay with their family in the community (Table 18) contraception for unmarried girls was available in the community and/or in nearby towns. Condoms were easily available to young men in two communities. Even so customary abortions were not uncommon in three of the communities.

Table 19: Pregnancy outside marriage taboo – 9 communities

Community	Region	Remoteness	Responses to pregnancy outside marriage	Abortions	Contraception for unmarried females
Yetmen	Amhara	Fairly connected Orthodox	Girls who are pregnant are not accepted for marriage	Cases where aborted infants found but mother could not be traced; girls usually use traditional herbs – a few deaths	Not mentioned
Somodo	Oromiya	Well connected Muslim majority	Shameful; three 19 year-olds knew 2 girls	Unmarried young women use traditional medication; some affected; no access to safe abortion	Shameful to use contraceptives
Oda Haro	Oromiya	Fairly remote Protestant majority	Most girls knew someone. Some have unwanted child and move to another place or abandon it	Traditional abortion very dangerous unless carried out early. Those who could afford went to towns for modern service	At Health Post but unmarried preferred to get them in town
Gelcha	Oromiya	Remote Traditional Muslim influence	Considered a taboo –fairly strict control of adolescent girls. But many girls are attending schooling and getting pregnant violating the clan rule that strictly forbids pre-marital sex. Many youths no longer obey clan rules.	Abortion not practised as Karrayu want to become numerous to withstand their enemies; lovers are forced to marry unmarried pregnant girls	Not mentioned
Adele Keke	Oromiya	Well connected Muslim	Culture prohibits youth from having sex before marriage. HEW thought there may be a few – aborting secretly	A few young women self-medicating – coca cola with ampicillin	Not mentioned
Luqa	SNNP	Very remote Traditional Protestant 20%	Adolescent girls allowed to have pre-marital sex. Go to trad practitioners for abortions. Child would be <i>mingi</i> and could be killed and the girl stigmatised.	Abortion is illegal and no safe services in the wereda. Women go to traditional practitioners – reported if they are accused in the law or have bleeding.	Girls use a herb with contraceptive properties
Adado	SNNP	Remote Protestant	Sexual relations before marriage not culturally acceptable; not in line with Protestantism. Young women said not common.	Unmarried girls go to other places and deliver the child or abort. Or get married.	Teenagers were not well-informed about contraceptives
Gara Godo	SNNP	Fairly remote Protestant//OC	Taboo – linked with traditional abortion (see Abortion)	Illegal abortion more common (secret); modern abortion outside wereda.	Not mentioned

Community	Region	Remoteness	Responses to pregnancy outside marriage	Abortions	Contraception for unmarried females
Do'oma	SNNP	Very remote Protestant	Fairly common – as was abortion The Protestant church condemned sex before marriage.	Abortion a big secret - >50% used traditional methods – mostly students. HC shortage of professionals & instruments; private clinic service;.	HEW said youth prefer abstinence advice

In the nine communities where pregnancy before marriage was shameful (Table 19) pregnant girls had a choice of staying in the community and having a secret customary abortion or marrying the father, or moving to another place to abort or have the child and keep or abandon it. In seven of these communities customary abortion was available in the community. In another girls reportedly went to other places to abort.

Table 20: Pregnancy outside marriage: no information – 5 communities

Community	Region	Remoteness /Religion	Pregnancy outside marriage	Abortions	Contraception for unmarried females
Dinki	Amhara	Very remote Muslim/ Orthodox	Not mentioned*	Abortion is rare as contraceptives are available to unmarried women	Girls said readily available and used by teenage girls to have pre-marital sex
Girar	SNNP	Fairly remote mixed Christian	Not mentioned	Customary abortion not mentioned. Service in Health Centre; unmarried girls privacy not respected by staff	Advice given to all including unmarried
Aze Debo'a	SNNP	Fairly connected Protestant	Not mentioned	Not mentioned	Not mentioned
Korodegaga	Oromiya	Remote Muslim	Not mentioned	Not mentioned	Not mentioned
Geblen	Tigray	Very remote Orthodox	Not mentioned	Not mentioned	Not mentioned

* 4 of the 5 communities 'not mentioning' pregnancy before marriage were in Stage 1 and not asked about it. Respondents in 2 of the 6 Stage 1 communities volunteered information anyway. There was no information from one of the connected communities in Stage 2.

Looking for patterns

Table 21 summarises the data on pregnancy outside marriage for the communities with data.

Table 21: Pregnancy outside marriage, contraception and abortions

	Number	Youth contraception available	Customary abortions reported	Total
Mothers and babies can stay in the community	6	6	4	6
Pregnancy outside marriage taboo	9	1	8	9
Sub-total	15	7	12	15
Communities with NA to pregnancy				
Contraception + abortion	1	1	0	1
Abortion only	1	1	NA	1
Sub-total	2	2	2	2
NA to all	3	NA	NA	3
Total	20	9	14	20

In most places it was shameful for unmarried girls to use contraception. This was the case in four of the five communities where illegitimate children were accepted, but they were near to towns where contraceptives were easily available, and the advent of injections had made it easier to conceal use. One wereda official suggested promoting the emergency pill. In only one of the nine communities where pregnancy was taboo was contraception said to be widely available and reducing pregnancy

outside marriage. In the Gedeo community ‘teenagers were not well-informed’, and in the Gamo community the Health extension Worker said they preferred abstention advice.

Customary abortion was reported from fourteen communities and may have existed in others. Methods included traditional herbs such as *endod* (soapberry), a mix of coca cola and ampicillin, or going to traditional practitioners. There had been some deaths. Modern services in towns were mentioned in seven more connected communities but they were expensive and maybe difficult to access since abortion was illegal unless extenuating circumstances could be proved.

Table A5 in the Appendix sorts the fifteen communities for which there is data into two types according to treatment of pregnancy outside marriage. There was some connection with remoteness, with four of the six communities where unmarried mothers could stay with their infants in the community being better connected and six of the nine where they could not being remote. There was no taboo on pregnancy outside marriage in three of the four Orthodox Christian communities while there was in all the predominantly Protestant communities. Muslim communities were divided between the two categories as expected if there were no pattern. All four Southern Region communities with data did not allow unmarried mothers to stay in the community with their infants.

Policy discussion

In the sample people reported an increase in sexual activity among unmarried young females , especially those living in towns away from their parents in order to go to school. However, there was little support for access to contraception and safe abortion by unmarried girls in most communities since stigma attached to pregnancy before marriage was still strong among community members, and in places among local health professionals. In only three of seventeen communities with data could unmarried young females get contraception from the Health Post without fear of this being reported to parents or teachers¹⁸. One consequence was that, in fourteen of the sixteen communities with data, a proportion of unmarried pregnant girls resorted to customary abortions facing all the risks described earlier. Other risks faced pregnant girls leaving for urban areas.

Communities where unmarried mothers were tolerated included the two Tigrayan communities with high levels of male migration and 40-50% female-headed households, and a number close to large towns. Extension of this tolerance to other kinds of rural community would help some girls, although customary abortions were reported from half of the communities where unmarried mother-baby couples could stay in the community and there was access to contraception in town, suggesting a need for sex education for teenagers.

Policymakers looking to target communities where risks are likely to be highest might further explore the links found in the sample with remoteness, Protestantism, and the Southern Region.

Reproductive risks for girls and young women growing up in different contexts

Table 22 uses data on the seven reproductive risks faced by girls and young women in nineteen of the twenty communities (Geblen in Tigray is omitted due to lack of a full set of data) and shows the average number of risks for different types of community categorised by remoteness, Region (though not including Tigray), and religion.

Table 22: Differences in mean number of risks in nineteen of the WIDE3 communities

Variate		Mean number of risks
Remoteness	Remoter (11)	3.7
	More connected (9)	2.6
Region	Tigray (2-NA from 1)	NA
	Amhara (4)	4

¹⁸ Knowledge about contraception by young women varied among the communities. In Dinki girls said it was readily available and used by teenage girls to have pre-marital sex; in Adado girls ‘were not well-informed about contraceptives’. There had been some initiatives to introduce sex education in schools (see the chapter on youth transitions).

Variate		Mean number of risks
	Oromiya (8)	2.5
	<i>Arssi+Sirba (4)</i>	0.75
	<i>Communities further from Addis Ababa (4)</i>	4.5
	SNNP (6)	4.5
Religion	Orthodox dominant (6)	2.6
	Protestant dominant* (6)	4.3
	Muslims dominant	2.5
	Customary dominant	5
Overall mean		3.4

* Girar mix of Protestants, Catholics, Orthodox Christians and Muslims – no figures.

The average number of risks across the communities was 3.4 with extremes of zero and six out of a possible total of seven.

Girls and young women faced more risks on average in remoter communities and SNNP and Amhara Regions, although the Oromo communities were of two distinct kinds: the average risk in the three Arssi communities and the Sirba community near Debre Zeit was only 0.75, while in the four communities more distant from Addis Ababa the mean was 4.5 which was similar to that in SNNP and Amhara Regions. Girls in communities where Orthodox Christianity or Islam were the dominant religions faced fewer risks on average than those in communities where Protestantism or customary religions had the most followers,

Table A6 in the Appendix shows that girls and young women in transition to adulthood between 2010 and 2013 faced different mixes of reproductive health and well-being risks in different kinds of community. In Table A6 the exemplar communities are sorted into five types within which risks are quite similar (see Tables 23-27). Marriage between ages 15 and 18 was occurring in all communities so is not discussed below.

Table 23: Pro- circumcision and extra-marital pregnancy problems; other risks low (5)

Communities	Risks higher	Risks lower	Other community features
Do'oma SNNP Gara Godo SNNP Aze Debo'a SNNP Somodo Oromiya Adele Keke Oromiya	Marriage 15-18 Marriage <15 (1/5) Circumcision ban resisted Extra-marital pregnancy taboo Customary abortions reported Hard to get contraceptives (4/5)	Enforcement of rape and forced abduction laws Girls <15 unlikely to be getting married (4/5) Access to contraceptives in town (1)	2 Protestant, 1 mixed Christian, 2 Muslim - <i>notably no Orthodox Christian communities</i> 3 Southern, 2 Oromiya (west and east) 3 remoter; 2 connected

In communities in this group the main risks girls faced came from circumcision and extra-marital pregnancy. The group included three remoter SNNP communities and two better connected Oromiya communities. No communities where the dominant religion was Orthodox Christian were included.

Table 24: Pro- circumcision and extra-marital pregnancy problems + different additional risks (3)

Communities	Risks common	Risks low	Other community features
Dinki Amhara Oda Haro Oromiya Gelcha Oromiya	Marriage 15-18 Circumcision ban resisted Extra-marital pregnancy taboo Hard to get contraceptives (1/3) Customary abortions reported (1/3) No enforcement of rape and forced abduction laws (2/3) Girls <15 marrying (2/3)	Not hard to get contraceptives (2/3) Customary abortions uncommon (2/3) Rape and forced abduction culturally taboo (1)	1 Protestant, 1 Muslim, 1 Customary; <i>notably no Orthodox Christian communities</i> 2 Oromiya (west and east) All remoter

Girls in transition to adulthood in these three communities faced similar risks to the previous group although there was access to contraceptives in two communities and customary abortions were uncommon in two. They also faced additional risks: for one community marriage <15, for another rape and forced abduction, and for the third all three of these additional risks. All the communities were remoter and in none were Orthodox Christians dominant. Two were in Oromiya and one in Amhara.

Table 25: Extra-marital pregnancy problems, rape laws not enforced + different additional risks (4)

Communities	Risks	Risks low	Other community features
Yetmen Amhara Luqa SNNP Adado SNNP Girar SNNP	Marriage 15-18 Extra-marital pregnancy taboo Hard to get contraceptives Customary abortions Rape law not enforced Forced abduction a problem (2/4) Girls marrying <15 (1/4)	Circumcision ban not resisted Forced abduction not a problem (2/4) Girls <15 unlikely to be marrying (3/4)	1 Orthodox, 1 Protestant, 1 mixed Christian, 1 customary – <i>no Muslim communities</i> 1 Amhara, 3 SNNP, No Oromiya or Tigray 3 remoter; 1 connected

In this group girls faced extra-marital pregnancy problems, including exclusion from the community, lack of access to contraceptives, and risks of customary abortion and rape. In two there was also the risk of forced abduction, and in one of these girls <15 were marrying. Three of the communities were in the SNNP Region and one in Amhara Region ; three were remoter and one better-connected; none were Muslim dominated.

Table 26: Unmarried mothers + babies accepted but rape laws not enforced + different additional risks (3)

Communities	Risks	Risks low	Other community features
Geblen Tigray Shumsheha Amhara Kormargefia Amhara	Marriage 15-18 Customary abortions Rape law not enforced Forced abduction still a problem Girls <15 marrying (1/3)	Circumcision ban not resisted Unmarried mothers + babies can live in community Not hard to get contraceptives Girls <15 unlikely to be marrying (2/3)	3 Orthodox 2 Amhara, 1 Tigray 2 remoter; 1 connected

In this group of three while unmarried mothers and babies were allowed to stay in the community there were risks attached to customary abortions, rape and forced abduction. In one community girls under 15 were marrying.

Table 27: Lower-risk communities (5)

Communities	Risks higher	Risks lower	Other community features
Harresaw, Tigray Sirba, Oromiya Turufe, Oromiya Korodegaga, Oromiya Oda Dawata, Oromiya	Marriage 15-18 Hard to get contraceptives (1/4) Customary abortion (2/4) Forced abduction (1/4)	All other risks low	2 Orthodox, 3 Muslim 1 in Tigray, 4 in Oromiya – 3 Arssi Oromo 2 remoter, 3 more connected

In one of these communities all risks to girls and young women in transition to adulthood appeared to be low. In each of the other four there was one higher risk: in one it was hard to get contraceptives, in two customary abortions were reported, and in the fourth there were risks of forced abduction. In one of the communities all residents were Arssi Oromo and Muslim, and in the other two Arssi Oromo Muslims were the main residents. One feature of these communities was that families tended to be large and in Korodegaga we had earlier evidence of considerable extra-marital sexual relations. In the other two communities Orthodox Christianity was the only religion.

The evidence in this section on differences in average incidence and combinations of risks among the WIDE3 communities has been used alongside earlier findings to inform the concluding section.

Conclusions and policy discussion

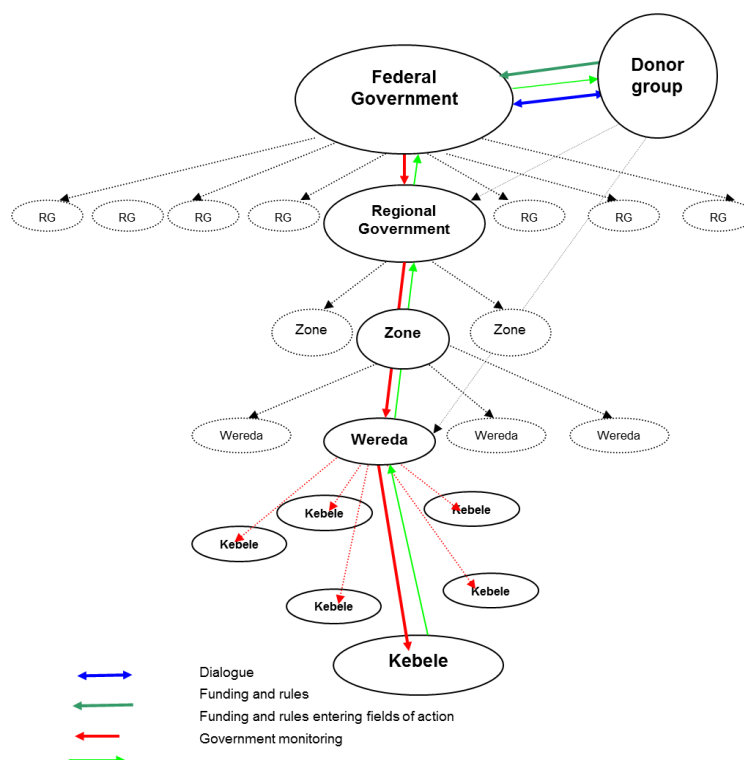
The four customary harmful practices

Federal and Regional Governments have relied on two policy levers in their partly successful attempts to reduce harm to girls and young women caused by the long-standing practices of circumcision, rape, forced abduction and early marriage: community education and the law. Education campaigns involving male and female wereda and kebele officials and health extension workers intensified after 2005 or so, while legislation criminalising female circumcision, rape, abduction and early marriage had been in place for some years before the WIDE3 research began.

All the legislation is still fit for purpose apart from the ban on all under-18 marriage. As discussed earlier, and in Pankhurst's chapter on youth transitions, there is a case for allowing special dispensations for physically mature 16 and 17 year-olds to marry.

Legal, campaign and service interventions to prevent harmful local practices are designed at macro level and then enter an implementation chain which fans out from the Federal Government through Regional Governments, zones, wereda and kebele (Figure 1). They are only one set of government interventions in communities which in 2013 we counted as 103 (Bevan *et al*: 2014:9) and the extent to which, and the ways in which, they are implemented, or not, are affected by the decisions and actions of officials at Regional, Zonal, wereda and kebele levels of government.

Figure 1: The policy journey



While the campaigns and legislation had contributed to a reduction of the level of risks from customary harmful practices for young females in the WIDE3 sample, in nine communities they still faced two or more of the four risks¹⁹, while in only four communities were all four risks low (Table A7). In fifteen of the twenty communities some female circumcision was still practised, and in six of these officials were making no attempt to implement the law. In nine communities young women were at still at risk of random rape with little chance of the perpetrator being punished, and in seven of these was also a risk of forced abduction involving rape. Marriage of girls aged less than eighteen was happening in all communities with no reports of fines or punishments, even though in five communities girls younger than fifteen were getting married.

The policy focus therefore needs to be on improving educational campaigns and implementation of laws rather than changing them (apart from the under-18 marriage ban). While all four risks should continue to be the subject of government action, subject to confirmation from other studies, the WIDE data suggests that to maximise the impact of scarce resources high priority might be given to (1) rape and (2) marriage at 15 in all rural communities. At the same time there could be extra campaigns targeted at communities (1) where girls from 12 to 14 are marrying as if they were adults and (2) where young and pre-pubertal girls are the subject of female circumcision and where the practice is more extreme.

¹⁹ Including marriage <15, but not marriage 15-17.

In considering targeting the evidence in the chapter reveals complex differences among the communities in the form and incidence of each of the practices, which cannot be easily summarised here, but could provide useful information to relevant Regional and Zonal officials. Remoteness, historic culture, and aspects of religion and Region were connected in quite complicated ways to some of the different practices. However, when the communities were categorised into five groups within which practices were similar each group contained mixes of Region and religion, and four of the five groups mixes of remoteness. There is a case for the collection of wereda data on the incidence of the practices in their different kebeles to enable design of effective prevention programmes and support for young females who have been harmed.

The evidence on implementation showed differences in the commitment of local wereda and kebele officials to educational campaigns, and implementation of the different harmful practices laws. Remoter communities were less likely to respond to interventions to modernise attitudes and distance made it more difficult for wereda officials and police to implement the laws. There was no evidence of intensification of government attempts to implement law through time though the samples in each of the three research stages (early 2010, late 2011 and 2013) were small. There were hints of corruption preventing arrests and punishments, particularly in relation to rape charges.

The presence of strong active women in wereda offices and kebeles had contributed to successful prevention of a number of individual cases of harmful practices. And a campaign against female circumcision with some success in changing community attitudes involved co-operation among wereda and kebele officials, NGOs, religious organisations and the clan leader, and a mix of exhortation, fines and threats of prison. If these harmful practices are to be effectively combatted there needs to be more investment in women affairs departments at all levels, and establishment of kebele teams charged with acting on all four risks. Key aims should be to change male attitudes and bring offenders to justice. These teams could be supervised by wereda women affairs offices and bring together kebele officials, militia leaders, community police, youth leaders, elders, religious leaders, other customary leaders, head teachers, health officials and interested NGOs if they exist.

There was little WIDE3 evidence of cases of girls and young women harmed by these practices receiving support from government services. Damage caused by circumcision was likely to be concealed to avoid potential punishments and girls who were raped were more likely to be stigmatised than offered counselling and modern abortions if they became pregnant. There were no reports of special services for early- and mid-teen wives.

Pregnancy before marriage, access to contraception and customary abortions

In the period 2010-13 the lives of girls and young women in transition to adulthood in rural communities were being transformed as, on the one hand the chances of becoming a farmer's wife decreased due to lack of land, and on the other, opportunities for education, local income-generating activities and migration for modern work increased. School attendance contributed to declining parental control and chances for males and females to socialise in new ways, particularly when girls had to go to towns for secondary education. This increasing independence was linked to a rise in pregnancy before marriage which communities were still coming to terms with. In a minority of communities it had become possible for unmarried young mothers to stay in the community with the child, often leaving it with its grandmother or other relatives while working in the community or migrating for work. In a minority of communities unmarried females could easily access contraception allowing pre-marital sexual relations with no risk of pregnancy. However, in most communities the dominant attitudes had not caught up with new risk and the continuing stigma and lack of assistance when girls became pregnant had led to many resorting to customary abortions.

Implementing plans for a youth reproductive health service

Three years before the Stage 1 fieldwork began the National Adolescent and Youth Reproductive Health Strategy 2007-2015 was launched, and by 2013 it had been in place for six years. The Government had also endorsed all the major international conventions on reproductive health rights

including those specific to adolescents and young adults. Box 1 lists the rights of adolescents and young people that the Government has signed up to.

Box 1: Reproductive health rights of adolescents and young people

- The right to information and education about sexual and reproductive health (SRH) services.
- The right to decide freely and responsibly on all aspects of one's sexual behaviour.
- The right to own, control, and protect one's own body.
- The right to be free of discrimination, coercion and violence in one's sexual decisions and sexual life.
- The right to expect and demand equality, full consent and mutual respect in sexual relationships.
- The right to the full range of accessible and affordable SRH services regardless of sex, creed, belief, marital status or location.

These services include:

- Contraception information, counselling and services
- Prenatal, postnatal and delivery care
- Healthcare for infants
- Prevention and treatment of reproductive tract infections (RTIs)
- Safe abortion services as permitted by law, and management of abortion-related complications
- Prevention and treatment of infertility
- Emergency services.

Ministry of Health, n.d.: 10

In communities in the WIDE3 sample rural young unmarried females received very few of the services theoretically promised to them by the Government. The need for action to reduce reproductive health risks facing young females has been described in a Ministry of Health training document for Health Extension Workers, which unfortunately has no date but was part of a programme starting in 2009.

'Despite their numbers, adolescents have not traditionally been considered a health priority in many countries, including Ethiopia. While the country has been implementing major interventions to reduce child mortality and morbidity, interventions addressing the health needs of young people have been limited. Young people often have less access to information, services and resources than those who are older. Health services are rarely designed specifically to meet their needs and health workers only occasionally receive specialist training in issues pertinent to adolescent sexual health. It is perhaps not surprising therefore that there are particularly low levels of health-seeking behaviour among young people. Similarly, young people in a variety of contexts have reported that access to contraception and condoms is difficult' (MoH, n.d.: 10).

Using the internet I have not been able to find any reports on the implementation of the Adolescent and Youth Reproductive (AYRH) health strategy 2007-15, or a new strategy from 2016. A 2015 report on success factors for women's and children's health (Ministry of Health, 2015) refers to 'adolescent and youth sexual and reproductive health' only once, including it in a list of seven key challenges to meeting the maternal mortality MDG and further improving child survival. However the ensuing list of six priorities does not include it. There is also very little on 'adolescent and youth friendly reproductive health' in the five-year Health Sector Transformation Plan from 2015/16: just two paragraphs:

'In recognition that adolescents face varied vulnerabilities to reproductive health issues, FMOH has developed a national strategy with minimum service package for scaling up of adolescent and youth reproductive health services.

The highest unmet need for family planning in 2011 EDHS was among the late adolescent age group (15-19 years) indicating the need to further strengthen adolescent reproductive health programs. According to the mini EDHS (2014), the birth rate among adolescents dropped from 79 births per 1,000 women in 2011 to 65 births per 1,000 women in 2014. It is believed

that limited access and utilization of adolescent and youth friendly reproductive health services contribute to high rates of maternal mortality and morbidity due to abortion, fistula and other pregnancy-related complications’.

The Guiding Principles of the AYRH 2007-15 were:

- Recognise the diversity of youth as a target population and therefore segment interventions by age, life stages, and vulnerability status
- Programmes must be based on development-oriented and rights-affirming principles
- Address the needs of youth through a holistic approach (involving relevant sector ministries and all major partners from the public, private and non-profit sectors)
- The recognition that gender differences are fundamental in framing AYRH
- Look for opportunities to integrate and link reproductive health services with other health and non-health interventions
- Promote youth involvement, youth leadership, and youth-adult partnerships
- Design and plan for scale-up and replication



This Ministry of Health training document provides very good advice to Health Extension Workers on what they can try to do within their communities to improve reproductive health services for girls and young women in transition to adulthood. But much more government investment is needed if the 15 million or so girls and young women aged 10-24 are to have their diverse reproductive health and well-being needs met.

In the period 2010-13 at Federal level legislation and campaigns to tackle the four harmful practices and a youth reproductive health strategy were in place, but there was an implementation gap with different consequences for young females in different kinds of rural community.

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Female circumcision

Table A1 uses the data from Tables 2-4 in the chapter to construct matrices identifying differences within each of the three circumcision community types²⁰ related to remoteness, religion, local culture, Region and timing of fieldwork, comparing the actual figures with the numbers expected if there were no patterns to the data.

The number expected in each cell if there were no pattern is shown in brackets. This expected value is calculated by multiplying the Row total by the Column total and dividing by the Table total. For example the expected value with no pattern in the first cell (Not practised.../remoteness) is 3. The row total is 12 (remote) and the column total is 5 (not practised..). In 5 out of 20 communities (or ¼) female circumcision is not practised and, if there were no pattern, one would expect ¼ of the remote communities (12/4=3) not to practice female circumcision. The fact that 4 rather than 3 do not observe the practice suggests it would be worth looking at these communities to see if there is some kind of remoteness that might have discouraged the practice. One idea is that in the past the practice spread to some extent as a result of copying, and that cut-off communities were not influenced by what was happening in other communities.

Table A 1: Patterns in female circumcision across the WIDE communities 2010-13

Parameter	Number of communities			
	Not practised or virtually stopped	Ban enforced	Ban not enforced	Total
Remoteness				
Remote/very remote	4 (3*)	4 (5.4)	4 (3.6)	12
Better connected	1 (2)	5 (3.6)	2 (2.4)	8
Total	5	9	6	20
Religion				
Predominantly Muslim	1 (1.5)	2 (2.7)	3 (1.8)	6
Predominantly OC	2 (1.5)	4 (2.7)	0 (1.8)	6
Predominantly Protestant	1 (1.25)	2 (2.25)	2 (1.5)	5
Mixed OC, Prot, Cath, Muslim	0 (0.25)	1 (0.45)	0 (0.3)	1
Predominantly traditional**	1 (0.5)	0 (0.9)	1 (0.6)	2
Total	5	9	6	20
Local culture				
Tigrayan	1			1
Tigrayan/Irob	1			1
North Wollo Amhara		1		1
East Gojam Amhara		1		1
North Shewa Amhara		1		1
Argobba/North Shewa Amhara			1	1
Arsi Oromo/Shewa Oromo/Amhara	1			1
East Shewa Oromo		1		1

²⁰ Not practised or virtually stopped; ban enforced; ban not enforced

Parameter	Number of communities			
	Not practised or virtually stopped	Ban enforced	Ban not enforced	Total
Arsi Oromo		1		1
Arsi /Tigrayan/Amhara/Southerners		1		1
Karrayu/Ittu/ Somali			1	1
East Harerghe Oromo			1	1
West Shewa Oromo			1	1
Jimma Oromo			1	1
Gedeo	1			1
Tsemai	1			1
Gurage		1		1
Wolayta		1		1
Kembata		1		1
Gamo 75%/Wolayta/Maale/Amhara			1	1
Total	5	9	6	20
Region				
Tigray region	2 (0.5)	0 (0.9)	0 (0.6)	2
Amhara region	0 (1)	3 (1.8)	1 (1.2)	4
Oromiya region	1 (2)	3 (3.6)	4 (2.4)	8
SNNP region	2 (1.5)	3 (2.7)	1 (1.8)	6
Total	5	9	6	20
Timing of fieldwork				
Stage 1 communities early 2010	1 (1.5)	4 (2.7)	1 (1.8)	6
Stage 2 communities late 2011	2 (2)	3 (3.6)	3 (2.4)	8
Stage 3 communities 2013	2 (1.5)	2 (2.7)	2 (1.8)	6
Total	5	9	6	20

* expected value if no pattern at all; **Pastoralist Luqa (20% Protestants) and Gelcha (with Muslim influence)

Rape

Table A2 computes the numbers on rape from the data in Tables 6 and 7 in the two categories (rape still a problem, rape reduced due to fear of punishment) in relation to remoteness, religion, local culture, Region, and timing of fieldwork (early 2010, late 2011, 2013). The numbers are compared with the numbers expected if there were no patterns in the data. Numbers suggesting a pattern are highlighted.

Table A 2: Patterns of rape across the WIDE communities 2010-13

Parameter	Number of communities		
	Rape still a problem – some reduction	Reduction of rape/not a real problem	Total
Remoteness			
Remote/very remote	8 (6.6*)	4 (5.4)	12
Better connected	3 (4.4)	5 (3.6)	8
Total	11	9	20
Religion			
Predominantly Muslim	3 (3.3)	3 (2.7)	6
Predominantly OC	4 (3.3)	2 (2.7)	6
Predominantly Protestant	2 (2.75)	3 (2.25)	5
Predominantly mixed Christian	1 (0.55)	0 (0.45)	1
Predominantly traditional**	1 (1.1)	1 (0.9)	2
Total	11	9	20
Local culture			
Tigrayan	1		1
Tigrayan/Irob		1	1
North Wollo Amhara	1		1
East Gojam Amhara	1		1
North Shewa Amhara	1		1
Argobba/North Shewa Amhara	1		1
Arsi Oromo	1		1
Arsi /Tigrayan/Amhara/Southerners	1		1
West Shewa Oromo	1		1
East Shewa Oromo		1	1

Parameter	Number of communities		
	Rape still a problem – some reduction	Reduction of rape/not a real problem	Total
Karrayu/Ittu/ Somali		1	1
East Harerghe Oromo		1	1
Arsi Oromo/Shewa Oromo/Amhara		1	1
Jimma Oromo		1	1
Gurage	1		1
Gedeo	1		1
Wolayta		1	1
Kembata		1	1
Gamo 75%/Wolayta/Maale/Amhara		1	1
Tsemai	1		1
Total	11		20
Region			
Tigray region	1 (1.1)	1 (0.9)	2
Amhara region	4 (2.2)	0 (1.8)	4
Oromiya region	3 (4.4)	5 (3.6)	8
SNNP region	3 (3.3)	3 (2.7)	6
Total	11	9	20
Timing of fieldwork			
Stage 1 communities early 2010	6 (3.3)	0 (2.7)	6
Stage 2 communities late 2011	2 (4.4)	6 (3.6)	8
Stage 3 communities 2013	3 (3.3)	3 (2.7)	6
Total	11	9	20

* expected value if no pattern at all; **Pastoralist Luqa (20% Protestants) and Gelcha (with Muslim influence)

Forced abduction

Table A3 computes the numbers on forced abduction in Tables 9-11 for three categories: (1) still a problem (8 communities); (2) reduced due to fear of punishment (2 communities); and (3) none or very rare (10). These numbers are compared with the numbers expected if there were no patterns to the data in relation to remoteness, religion, local culture, Region, and timing of fieldwork (early 2010, late 2011, 2013). Numbers suggesting a pattern are highlighted.

Table A 3: Patterns of forced abduction across the WIDE communities 2010-13

Parameter	Number of communities			
	Forced abduction still a (reduced) problem	Reduced forced abduction: fear of punishment	Forced abduction no longer seen as a problem	Total
Remoteness				
Remote/very remote	6 (4.8)*	1 (1.2)	5 (6)	12
Better connected	2 (3.2)	1 (0.8)	5 (4)	8
Total	8	2	10	20
Religion				
Predominantly Muslim	1 (2.4)	1 (0.6)	4 (3)	6
Predominantly OC	4 (2.4)	0 (0.6)	2 (3)	6
Predominantly Protestant	2 (2)	1 (0.5)	2 (2.5)	5
Mixed OC, Prot, Cath, Muslim	0 (0.4)	0 (0.1)	1 (0.5)	1
Predominantly traditional**	1 (0.8)	0 (0.2)	1 (1)	2
Total	8	2	10	20
Local culture				
Tigrayan/Irob	1			1
Tigrayan			1	1
North Wollo Amhara	1			1
East Gojam Amhara			1	1
North Shewa Amhara	1			1
Argobba/North Shewa Amhara	1			1
East Shewa Oromo	1			1
West Shewa Oromo	1			1
East Harerghe Oromo		1		1
Karrayu/Ittu/ Somali			1	1
Arsi Oromo			1	1

Parameter	Number of communities			
	Forced abduction still a (reduced) problem	Reduced forced abduction: fear of punishment	Forced abduction no longer seen as a problem	Total
Arsi Oromo/Shewa Oromo/Amhara			1	1
Arsi /Tigrayan/Amhara/Southerners			1	1
Jimma Oromo			1	1
Gurage			1	1
Gedeo	1			1
Tsemai	1			1
Kembata		1		1
Wolayta			1	1
Gamo 75%/Wolayta/Maale/Amhara			1	1
Total	8	2	10	20
Region				
Tigray region	1 (0.8)	0 (0.2)	1 (1)	2
Amhara region	3 (1.6)	0 (0.4)	1 (2)	4
Oromiya region	2 (3.2)	1 (0.8)	5 (4)	8
SNNP region	2 (2.4)	1 (0.6)	3 (3)	6
Total	8	2	10	20
Timing of fieldwork				
Stage 1 communities early 2010	2 (2.4)	0 (0.6)	4 (3)	6
Stage 2 communities late 2011	2 (3.2)	2 (0.8)	4 (4)	8
Stage 3 communities 2013	4 (2.4)	0 (0.6)	2 (3)	6
Total	8	2	10	20

* expected value if no pattern at all; **Pastoralist Luqa (20% Protestants) and Gelcha (with Muslim influence)

Marriage ages

Table A4 uses the data from Tables 14-16 in the chapter to construct matrices identifying differences within each marriage age community type²¹ related to remoteness, religion, local culture, Region and timing of fieldwork, comparing the actual figures with the numbers expected if there were no patterns to the data.

Table A 4: Patterns in marriage ages across the WIDE3 communities

Parameter	Number of communities			
	Attempts to enforce ban on under-18 marriage	Marriage before 15 not the norm – ban not enforced	Marriage before 15 possible – ban not enforced	Total
Remoteness				
Remote/very remote	2 (1.8*)	6 (7.2)	4 (3)	12
Better connected	1(1.2)	6 (4.8)	1 (2)	8
Total	3	12	5	20
Religion				
Predominantly Muslim	0 (0.9)	4 (3.6)	2 (1.5)	6
Predominantly OC	3 (0.9)	2 (3.6)	1(1.5)	6
Predominantly Protestant	0 (0.75)	5(3)	0 (1.25)	5
Mixed OC, Prot, Cath, Muslim	0 (0.15)	1 (0.6)	0 (0.25)	1
Predominantly traditional**	0 (0.3)	0 (1.2)	2 (0.5)	2
Total	3	12	5	
Local culture				
Tigrayan	1			1
Tigrayan/Irob	1			1
East Gojam Amhara	1			1
North Shewa Amhara		1		1
North Wollo Amhara			1	1
Argobba/North Shewa Amhara			1	1
East Shewa Oromo		1		1
Arsi Oromo		1		1
Arsi Oromo/Shewa Oromo/Amhara		1		1

²¹ Attempts to enforce ban on under-18 marriage; marriage <15 not the norm and ban not enforced; marriage <15 possible and ban not enforced.

Parameter	Number of communities			
	Attempts to enforce ban on under-18 marriage	Marriage before 15 not the norm – ban not enforced	Marriage before 15 possible – ban not enforced	Total
Arsi /Tigrayan/Amhara/Southerners		1		1
West Shewa Oromo		1		1
Jimma Oromo		1		1
Karrayu pastoralists/Ittu/ Somali			1	1
East Harerghe Oromo			1	1
Gurage		1		1
Gedeo		1		1
Wolayta		1		1
Kembata		1		1
Gamo		1		1
75%/Wolayta/Maale/Amhara				
Tsemai pastoralists			1	1
Total	3	12	5	20
Region				
Tigray region	2 (0.3)	0 (1.2)	0 (0.5)	2
Amhara region	1 (0.6)	1 (2.4)	2 (1)	4
Oromiya region	0 (1.2)	6 (4.8)	2 (2)	8
SNNP region	0 (0.9)	5 (3.6)	1 (1.5)	6
Total	3	12	5	20
Timing of fieldwork				
Stage 1 communities early 2010	2 (0.9)	3 (3.6)	1 (1.5)	6
Stage 2 communities late 2011	1 (1.2)	3 (4.8)	4 (2)	8
Stage 3 communities 2013	0 (0.9)	6 (3.6)	0 (1.5)	6
Total	3	12	5	20

* expected value if no pattern at all; **Pastoralist Luqa (20% Protestants) and Gelcha (with Muslim influence)

Pregnancy outside marriage, contraception and abortions

Table A5 uses the data from Tables 18-20 in the chapter to construct a matrix identifying differences between communities where pregnancy outside marriage was taboo and communities where this was no longer the case and relating these to remoteness, religion, local culture, Region and timing of research, comparing the actual figures with the numbers expected if there were no patterns to the data. There is also linked information for each category on access to contraception and incidence of customary abortions.

Table A 5: Pregnancy outside marriage, availability of youth contraception, and customary abortions

Parameters	Number of communities (of 15)					
	Pregnancy outside marriage 'taboo'	Youth contraception available	Customary abortions reported	Mothers and babies can stay in the community	Youth contraception available	Customary abortions reported
Remoteness						
Remote/very remote	6 (4.8*)	0	5	2 (3.2)	1	1
Better connected	3 (4.2)	1	3	4 (2.8)	4	2
Total	9	1	8	6	5	3
Religion						
Predominantly Muslim	3 (3)	0	3	2 (2)	2	1
Predominantly OC	0 (2.4)		1	4 (1.6)	3	2
Predominantly Protestant	5 (3)	1	4	0 (2)	0	0
Predominantly traditional*	1 (0.6)	0	0	0 (0.4)	0	0
Total	9	1	8	6	5	3
Local culture						
Karrayu/Ittu/ Somali	1	0	0			
East Gojam Amhara	1	0	1			
Jimma Oromo	1	0	1			
East Harerghe Oromo	1	0	1			

Parameters	Number of communities (of 15)					
	Pregnancy outside marriage 'taboo'	Youth contraception available	Customary abortions reported	Mothers and babies can stay in the community	Youth contraception available	Customary abortions reported
West Shewa Oromo	1	1	1			
Gedeo	1	0	1			
Wolayta	1	0	1			
Gamo 75%+ mix of 4 groups	1	0	1			
Tsemai	1	0	1			
Tigrayan				1	1	1
North Wollo Amhara				1	1	1
North Shewa Amhara				1	1	1
Arsi /Tigrayan/Amhara/South				1	1	1
Arssi /Shewa Oromo/Amhara				1	1	0
East Shewa Oromo				1	1	0
Argobba/Amhara	NA	1	0			
Gurage	NA	1	NA			
Total	9	3	8	6	6	4
Region						
Tigray region	0 (0.6)	0	0	1 (0.4)	1	1
Amhara region	1 (1.8)	1	1	2 (1.2)	2	2
Oromiya region	4 (4.2)	1	3	3 (2.8)	3	1
SNNP region	4 (2.4)	1	4	0 (1.6)	0	0
Total	9	3	8	6	6	4
Timing of fieldwork						
Stage 1 communities early 2010	1 (4 not asked)	2		1	1	1
Stage 2 communities late 2011	5 (1 no answer)	0		2	3	2
Stage 3 communities 2013	3	1		3	2	1
Total	9	3		6	6	4

* expected value if no pattern at all; **Pastoralist Luqa (20% Protestants) and Gelcha (with Muslim influence)

Patterns of reproductive health risk for young females in the twenty WIDE communities 2010-13

Table A6 constructs a truth table using the community data on all the reproductive health risks facing young females on a True/False basis, organised by Region. Where there is an X in a cell the risk applies and where there is a gap it does not. The data are organised so that adjacent rows contain similar patterns. The table sorts the twenty exemplar communities into five types or groups within which girls and young women in transition to adulthood experience similar risks related to reproductive health and well-being. In addition there are two communities exemplifying other types.

Table A 6: Patterns of reproductive health risks in the WIDE3 communities – organised by pattern

Region	Community	Circum-cision ban resisted	Extra-marital pregnancy taboo	Hard for unmarried to get contraceptives	Customary abortions reported	Girls < 15 getting married	Youth rape not well addressed	Forced abduction not well addressed	Marriage 15- 18 occurring	Remote-ness	Dominant local culture	Dominant religion
Oromiya	Adele Keke	X	X		X	X			X	Well connected	Harerghe Oromo	Muslim
Oromiya	Somodo	X	X	X	X				X	Well connected	Jimma Oromo	Muslim
SNNP	Do'oma	X	X	X	X				X	Very remote	Gamo 75%/ Wolayitta 15%	Protestant
SNNP	Aze Debo'a	X	X*	X*	X*				X	Fairly connected	Kembata	Protestant
SNNP	Gara Godo	X	X	X	X				X	Fairly remote	Wolayitta	Mixed Christian
Oromiya	Gelcha	X	X	X		X			X	Fairly remote	Karrayu - pastoralist	Customary/Muslim
Oromiya	Oda Haro	X	X		X		X	X	X	Fairly remote	Shewa Oromo	Protest-ants 64%
Amhara	Dinki	X	X*			X	X	X	X	Very remote	Argobba 60+%/ Amhara	Muslim 60%; OC 40%
SNNP	Luqa		X	X	X	X	X	X	X	Very remote	Tsema - pastoralist	Customary/Prot.
SNNP	Adado		X	X	X		X	X	X	Remote	Gedeo	Protestant
SNNP	Girar		X*	X*	X*		X		X	Fairly remote	Gurage	Mixed Christian
Amhara	Yetmen		X	X	X		X		X	Fairly connected	East Gojam	Orthodox
Amhara	Shumsheha				X	X	X	X	X	Fairly remote	North Wollo	Mostly Orthodox
Amhara	Kormargefia				X		X	X	X	Quite well connected	Amhara	Orthodox
Tigray	Geblen			NA	NA		X	X	X	Very remote	Tigray/Irob	Orthodox
Oromiya	Korodegaga	*	*	X	*		*		X	Remote	Arssi Oromo	Muslim
Oromiya	Turufe				X				X	Very well connected	Arssi Oromo+	Muslim
Tigray	Harresaw				X				X	Remote	Tigray	Orthodox
Oromiya	Sirba							X	X	Very well connected	Shewa Oromo	Orthodox
Oromiya	Oda Dawata								X	Fairly connected	Arssi Oromo+	Muslim70%Orthodox

* These communities had no direct data and I have made a judgment on the basis of other information as to what the likely response would have been if the questions had been asked.

Table A 7: Patterns of reproductive health risks in the WIDE3 communities – organised by Region

Region	Community	Circumcision ban resisted	Extra-marital pregnancy taboo	Hard for unmarried to get contraceptives	Customary abortions reported	Girls < 15 getting married	Youth rape not well addressed	Forced abduction not well addressed	No of risks	Marriage 15- 18 occurring	Remote-ness	Dominant local culture	Dominant religion
Tigray	Geblen			NA	NA		X	X	NA	X	Very remote	Tigray/Irob	Orthodox
Tigray	Harresaw				X				1	X	Remote	Tigray	Orthodox
Amhara	Dinki	X	X*			X	X	X	5	X	Very remote	Argobba 60+%/ Amhara	Muslim 60%; OC 40%
Amhara	Yetmen		X	X	X		X		4	X	Fairly connected	East Gojam	Orthodox
Amhara	Shumsheha				X	X	X	X	4	X	Fairly remote	North Wollo	Mostly Orthodox
Amhara	Kormargefia				X		X	X	3	X	Quite well connected	Amhara	Orthodox
Oromiya	Adele Keke	X	X		X	X			4	X	Well connected	Hareghe Oromo	Muslim
Oromiya	Somodo	X	X	X	X				4	X	Well connected	Jimma Oromo	Muslim
Oromiya	Gelcha	X	X	X		X			4	X	Fairly remote	Karrayu - pastoralist	Customary/Muslim
Oromiya	Oda Haro	X	X		X		X	X	5	X	Fairly remote	Shewa Oromo	Protest-ants 64%
Oromiya	Korodegaga	*	*	X	*		*		1	X	Remote	Arssi Oromo	Muslim
Oromiya	Turufe				X				1	X	Very well connected	Arssi Oromo+	Muslim
Oromiya	Sirba							X	1	X	Very well connected	Shewa Oromo	Orthodox
Oromiya	Oda Dawata								0	X	Fairly connected	Arssi Oromo+	Muslim70%Orthodox
SNNP	Do'oma	X	X	X	X				4	X	Very remote	Gamo 75%/ Wolayitta 15%	Protestant
SNNP	Aze Debo'a	X	X*	X*	X*				4	X	Fairly connected	Kembata	Protestant
SNNP	Gara Godo	X	X	X	X				4	X	Fairly remote	Wolayitta	Mixed Christian
SNNP	Luqa		X	X	X	X	X	X	6	X	Very remote	Tsemay - pastoralist	Customary/Prot.
SNNP	Adado		X	X	X		X	X	5	X	Remote	Gedeo	Protestant
SNNP	Girar		X*	X*	X*		X		4	X	Fairly remote	Gurage	Mixed Christian

Table A 8: Patterns of reproductive health risks in the WIDE3 communities – organised by religion

Dominant religion	Community	Circumcision ban resisted	Extra-marital pregnancy taboo	Hard for unmarried to get contraceptives	Customary abortions reported	Girls < 15 getting married	Youth rape not well addressed	Forced abduction not well addressed	No of risks	Marriage 15- 18 occurring	Region	Remote-ness	Dominant local culture
Orthodox	Geblen			NA	NA		X	X	NA	X	Tigray	Very remote	Tigray/Irob
Orthodox	Shumsheha				X	X	X	X	4	X	Amhara	Fairly remote	North Wollo
Orthodox	Yetmen		X	X	X		X		4	X	Amhara	Fairly connected	East Gojam
Orthodox	Kormargefia				X		X	X	3	X	Amhara	Quite well connected	Amhara
Orthodox	Harresaw				X				1	X	Tigray	Remote	Tigray
Orthodox	Sirba							X	1	X	Oromiya	Very well connected	Shewa Oromo
Protestant	Adado		X	X	X		X	X	5	X	SNNP	Remote	Gedeo
Protestants	Oda Haro	X	X		X		X	X	5	X	Oromiya	Fairly remote	Shewa Oromo
Protestant	Do'oma	X	X	X	X				4	X	SNNP	Very remote	Gamo 75%/ Wolayitta 15%
Protestant	Aze Debo'a	X	X*	X*	X*				4	X	SNNP	Fairly connected	Kembata
Protestant	Gara Godo	X	X	X	X				4	X	SNNP	Fairly remote	Wolayitta
Mixed Christian	Girar		X*	X*	X*		X		4	X	SNNP	Fairly remote	Gurage
Muslim 60%; OC 40%	Dinki	X	X*			X	X	X	5	X	Amhara	Very remote	Argobba 60+%/ Amhara
Muslim	Adele Keke	X	X		X	X			4	X	Oromiya	Well connected	Harerghe Oromo
Muslim	Somodo	X	X	X	X				4	X	Oromiya	Well connected	Jimma Oromo
Muslim	Korodegaga	*	*	X	*		*		1	X	Oromiya	Remote	Arssi Oromo
Muslim	Turufe				X				1	X	Oromiya	Very well connected	Arssi Oromo+
Muslim70%Orthodox	Oda Dawata								0	X	Oromiya	Fairly connected	Arssi Oromo+
Customary/Prot.	Luqa		X	X	X	X	X	X	6	X	SNNP	Very remote	Tsemay - pastoralist
Customary/Muslim	Gelcha	X	X	X		X			4	X	Oromiya	Fairly remote	Karrayu - pastoralist

Table A 9: Patterns of reproductive health risks in the WIDE3 communities – organised by remoteness

Remote-ness	Community	Circum-cision ban resisted	Extra-marital pregnancy taboo	Hard for unmarried to get contraceptives	Customary abortions reported	Girls < 15 getting married	Youth rape not well addressed	Forced abduction not well addressed	No of risks	Marriage 15- 18 occurring	Region	Dominant religion	Dominant local culture
Very remote	Luqa		X	X	X	X	X	X	6	X	SNNP	Customary/Protestant	Tsema - pastoralist
Remote	Adado		X	X	X		X	X	5	X	SNNP	Protestant	Gedeo
Fairly remote	Gelcha	X	X	X		X			4	X	Oromiya	Customary/Muslim	Karrayu - pastoralist
Fairly remote	Gara Godo	X	X	X	X				4	X	SNNP	Protestant	Wolayitta
Very remote	Do'oma	X	X	X	X				4	X	SNNP	Protestant	Gamo 75%/ Wolayitta 15%
Fairly remote	Shumsheha				X	X	X	X	4	X	Amhara	Orthodox	North Wollo
Fairly remote	Oda Haro	X	X		X		X	X	4	X	Oromiya	Protestants 64%	Shewa Oromo
Very remote	Dinki	X	X*			X	X	X	4	X	Amhara	Muslim 60%; OC 40%	Argobba 60+%/ Amhara
Fairly remote	Girar		X*	X*	X*		X		4	X	SNNP	Mixed Christian	Gurage
Remote	Korodegaga	*	*	X	*		*		1	X	Oromiya	Muslim	Arssi Oromo
Very remote	Geblen			NA	NA		X	X	NA	X	Tigray	Orthodox	Tigray/Irob
Remote	Harresaw				X				1	X	Tigray	Orthodox	Tigray
Fairly connected	Aze Debo'a	X	X*	X*	X*				4	X	SNNP	Protestant	Kembata
Well connected	Adele Keke	X	X		X	X			4	X	Oromiya	Muslim	Harerghe Oromo
Well connected	Somodo	X	X	X	X				4	X	Oromiya	Muslim	Jimma Oromo
Fairly connected	Yetmen		X	X	X		X		4	X	Amhara	Orthodox	East Gojam
Quite well connected	Kormargefia				X		X	X	3	X	Amhara	Orthodox	Amhara
Very well connected	Turufe				X				1	X	Oromiya	Muslim	Arssi Oromo+
Very well connected	Sirba							X	1	X	Oromiya	Orthodox	Shewa Oromo
Fairly connected	Oda Dawata								0	X	Oromiya	Muslim70%Orthodox	Arssi Oromo+

Table A 10: Pattern of risks from the four customary harmful practices

Region	Community	Circum-cision ban resisted	Girls < 15 getting married	Youth rape not well addressed	Forced abduction not well addressed	No of risks	Remote-ness	Dominant local culture	Dominant religion
Amhara	Dinki	X	X	X	X	4	Very remote	Argobba 60+%/ Amhara	Muslim 60%; OC 40%
Oromiya	Oda Haro	X		X	X	3	Fairly remote	Shewa Oromo	Protest-ants 64%
Amhara	Shumsheha		X	X	X	3	Fairly remote	North Wollo	Mostly Orthodox
SNNP	Luqa		X	X	X	3	Very remote	Tsemay - pastoralist	Customary/Prot.
Tigray	Geblen			X	X	2	Very remote	Tigray/Irob	Orthodox
Amhara	Kormargefia			X	X	2	Quite well connected	Amhara	Orthodox
Oromiya	Adele Keke	X	X			2	Well connected	Harerghe Oromo	Muslim
SNNP	Adado			X	X	2	Remote	Gedeo	Protestant
Oromiya	Gelcha	X	X			2	Fairly remote	Karrayu - pastoralist	Customary/Muslim
SNNP	Do'oma	X				1	Very remote	Gamo 75%/ Wolayitta 15%	Protestant
SNNP	Aze Debo'a	X				1	Fairly connected	Kembata	Protestant
SNNP	Gara Godo	X				1	Fairly remote	Wolayitta	Mixed Christian
SNNP	Girar			X		1	Fairly remote	Gurage	Mixed Christian
Amhara	Yetmen			X		1	Fairly connected	East Gojam	Orthodox
Oromiya	Somodo	X				1	Well connected	Jimma Oromo	Muslim
Oromiya	Sirba				X	1	Very well connected	Shewa Oromo	Orthodox
Oromiya	Korodegaga	*		*		0	Remote	Arssi Oromo	Muslim
Oromiya	Turufe					0	Very well connected	Arssi Oromo+	Muslim
Tigray	Harresaw					0	Remote	Tigray	Orthodox
Oromiya	Oda Dawata					0	Fairly connected	Arssi Oromo+	Muslim70%Orthodox

Table A 11: Pattern of risks related to pregnancy outside marriage

Remote-ness	Community	Extra-marital pregnancy taboo	Hard for unmarried to get contraceptives	Customary abortions reported	No of risks	Marriage 15-18 occurring	Region	Dominant religion	Dominant local culture
Very remote	Luqa	X	X	X	3	X	SNNP	Customary/Protestant	Tsema - pastoralist
Remote	Adado	X	X	X	3	X	SNNP	Protestant	Gedeo
Fairly remote	Gara Godo	X	X	X	3	X	SNNP	Protestant	Wolayitta
Very remote	Do'oma	X	X	X	3	X	SNNP	Protestant	Gamo 75%/ Wolayitta 15%
Fairly connected	Yetmen	X	X	X	3	X	Amhara	Orthodox	East Gojam
Fairly connected	Aze Debo'a	X*	X*	X*	3	X	SNNP	Protestant	Kembata
Fairly remote	Girar	X*	X*	X*	3	X	SNNP	Mixed Christian	Gurage
Well connected	Somodo	X	X	X	3	X	Oromiya	Muslim	Jimma Oromo
Fairly remote	Gelcha	X	X		2	X	Oromiya	Customary/Muslim	Karrayu - pastoralist
Well connected	Adele Keke	X		X	2	X	Oromiya	Muslim	Harerghe Oromo
Fairly remote	Shumsheha			X	1	X	Amhara	Orthodox	North Wollo
Fairly remote	Oda Haro	X		X	1	X	Oromiya	Protestants 64%	Shewa Oromo
Very remote	Dinki	X*			1	X	Amhara	Muslim 60%; OC 40%	Argobba 60+%/ Amhara
Remote	Korodegaga	*	X	*	1	X	Oromiya	Muslim	Arssi Oromo
Remote	Harresaw			X	1	X	Tigray	Orthodox	Tigray
Quite well connected	Kormargefia			X	1	X	Amhara	Orthodox	Amhara
Very well connected	Turufe			X	1	X	Oromiya	Muslim	Arssi Oromo+
Very well connected	Sirba				1	X	Oromiya	Orthodox	Shewa Oromo
Fairly connected	Oda Dawata				0	X	Oromiya	Muslim70%Orthodox	Arssi Oromo+
Very remote	Geblen		NA	NA	NA	X	Tigray	Orthodox	Tigray/Irob

*Imputed from other evidence