

ETHIOPIA



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STATISTICAL PROFILE ON FEMALE GENITAL MUTILATION/CUTTING

Female genital mutilation/cutting (FGM/C) refers to “all procedures involving partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons.”¹ More than 125 million girls and women alive today have been cut in the 29 countries in Africa and the Middle East where FGM/C is concentrated. As many as 30 million girls are at risk of being cut before their 15th birthday if current trends continue. FGM/C is a violation of girls’ and women’s human rights and is condemned by many international treaties and conventions, as well as by national legislation in many countries. Yet, where it is practised FGM/C is performed in line with tradition and social norms to ensure that girls are socially accepted and marriageable, and to uphold their status and honour and that of the entire family. UNICEF works with government and civil society partners towards the elimination of FGM/C in countries where it is still practised.

1. World Health Organization, *Eliminating Female Genital Mutilation: An interagency statement*, WHO, UNFPA, UNICEF, UNIFEM, OHCHR, UNHCR, UNECA, UNESCO, UNDP, UNAIDS, WHO, Geneva, 2008, p. 4.

2004 National decree/legislation banning FGM/C passed

SELECTED STATISTICS ON WOMEN'S STATUS

24% of women 20-24 years were married or in union before age 15

49% of women 20-24 years were married or in union before age 18

28% of women 20-24 years have given birth by age 18

81% of women 15-49 years think that a husband/partner is justified in hitting/beat his wife under certain circumstances

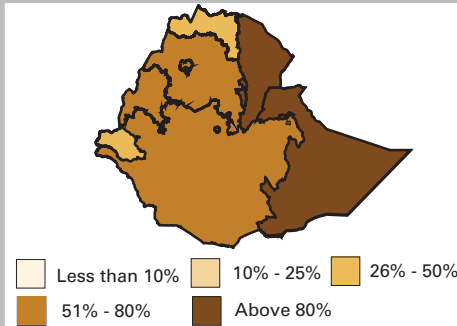
20% of women 15-49 years make use of at least one type of information media at least once a week (newspaper, magazine, television, radio)

Source: DHS 2005

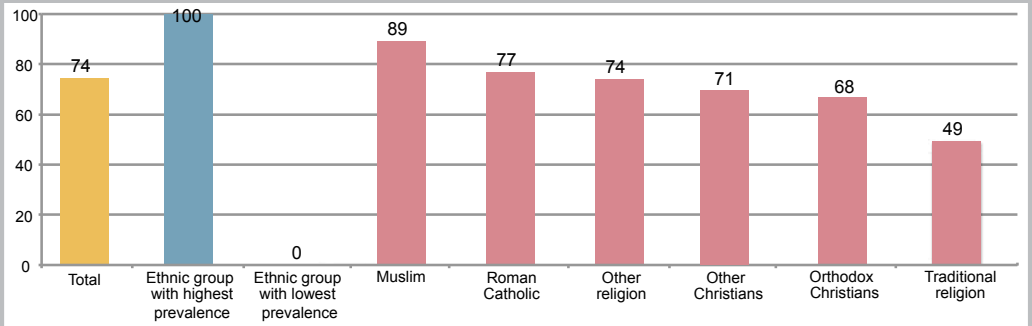
HOW WIDESPREAD IS THE PRACTICE?

The practice of FGM/C is nonexistent among certain ethnic groups and universal in others

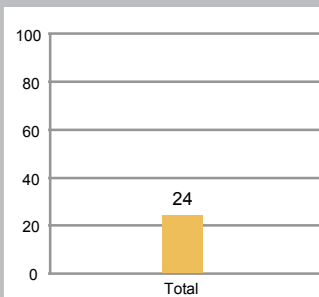
Percentage of girls and women aged 15 to 49 years who have undergone FGM/C, by region



Percentage of girls and women aged 15 to 49 years who have undergone FGM/C, by ethnicity and religion

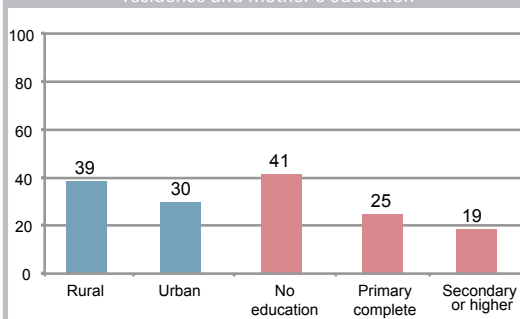


Percentage of girls aged 0 to 14 years who have undergone FGM/C

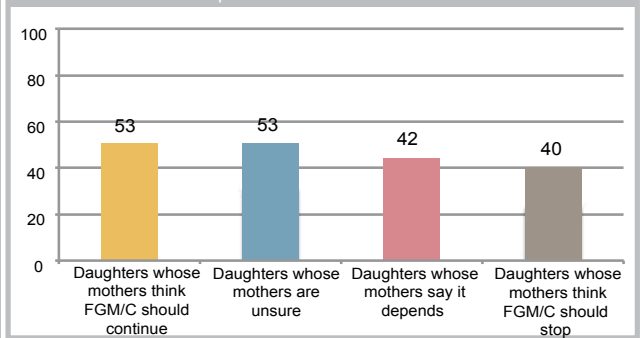


Source: Welfare Monitoring Survey, 2011

Percentage of girls and women aged 15 to 49 years with at least one living daughter who has undergone FGM/C, by residence and mother's education



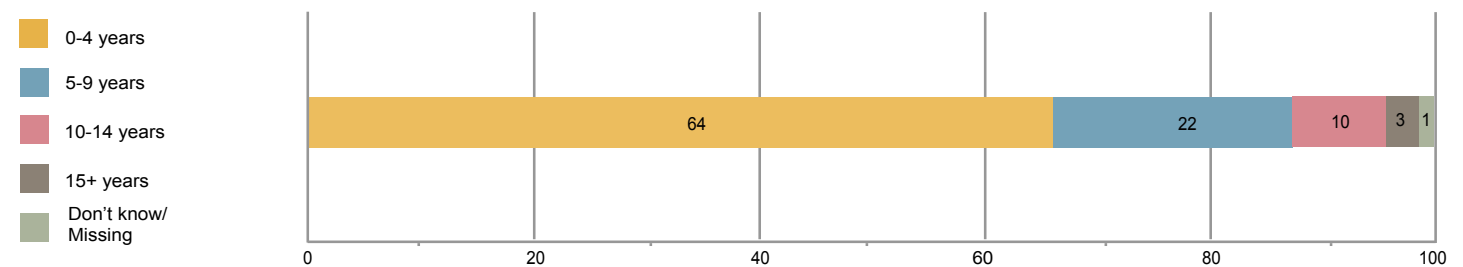
Among daughters of cut girls and women, the percentage of those who have undergone FGM/C, by mothers' attitudes about whether the practice should continue



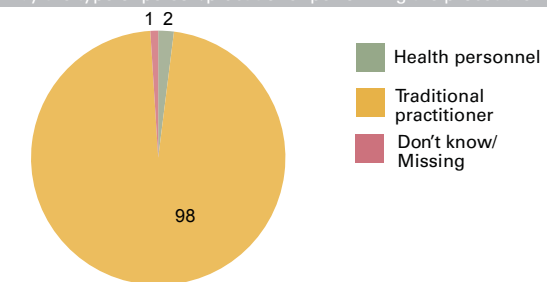
WHEN AND HOW IS FGM/C PERFORMED?

Nearly two in three girls are cut before the age of five

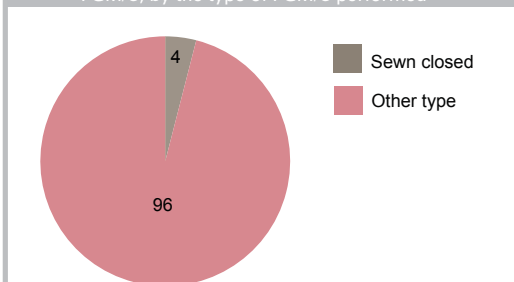
Percentage distribution of girls and women aged 15 to 49 years with at least one living daughter who has undergone FGM/C, by age at which cutting occurred



Percentage distribution of girls and women aged 15 to 49 years with at least one living daughter who has undergone FGM/C, by the type of person/practitioner performing the procedure



Percentage distribution of girls and women aged 15 to 49 years with at least one living daughter who has undergone FGM/C, by the type of FGM/C performed

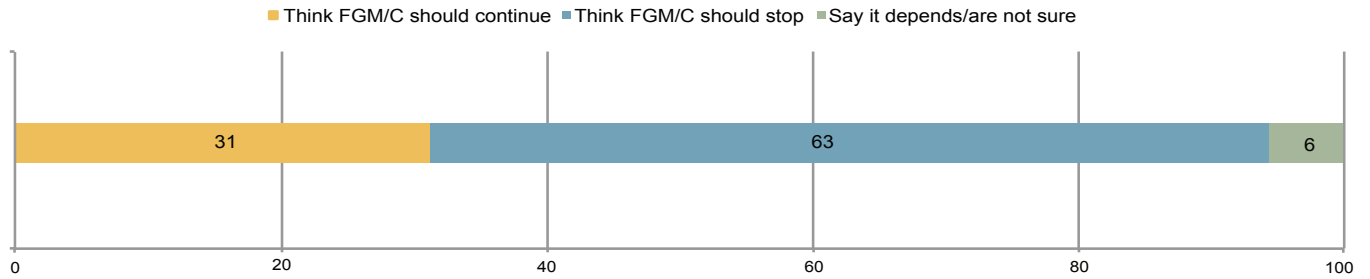


Notes: The boundaries and the names shown on the map do not imply official endorsement or acceptance by the United Nations. Only categories with 25 or more unweighted cases are presented. Due to rounding, some of the data presented may not add up to 100 per cent. Data on the ethnic group with the lowest and highest FGM/C prevalence are based on 25-49 unweighted cases. The category for 'Other Christians' includes 'Orthodox,' which represents the majority of the population. The total prevalence among girls aged 0 to 14 years is from the Welfare Monitoring Survey, 2011. Disaggregated data are from the DHS 2005 since this data were not available from the Welfare Monitoring Survey. 'Health personnel' includes doctors, nurses, midwives and other health workers; 'Traditional practitioner' includes traditional circumcisers, traditional birth attendants, traditional midwives and other types of traditional practitioners. Questions on type of cutting only differentiated infibulation from non-infibulating forms of FGM/C.

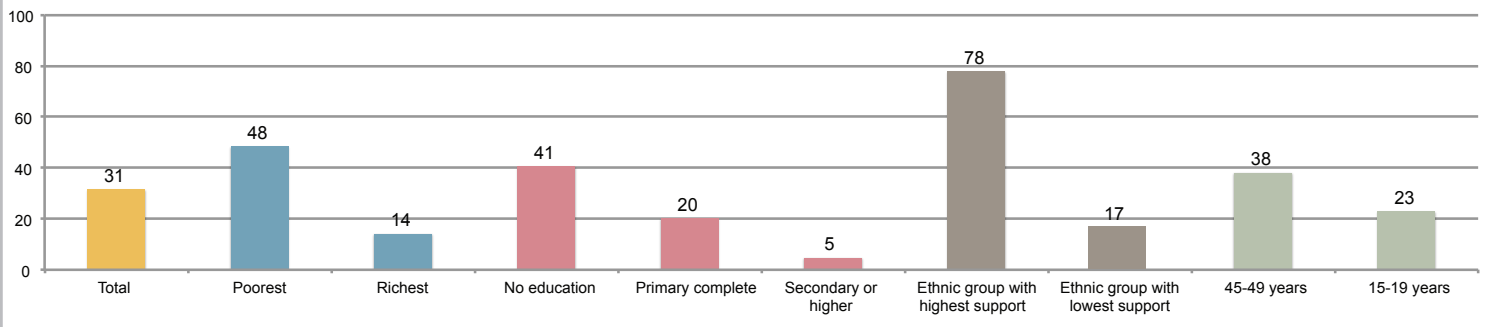
WHAT ARE THE PREVAILING ATTITUDES TOWARDS FGM/C?

Almost two in three girls and women think FGM/C should stop

Percentage of girls and women aged 15 to 49 years who have heard about FGM/C, by their attitudes about whether the practice should continue



Percentage of girls and women aged 15 to 49 years who have heard about FGM/C and think the practice should continue, by household wealth quintile, education, ethnicity and age

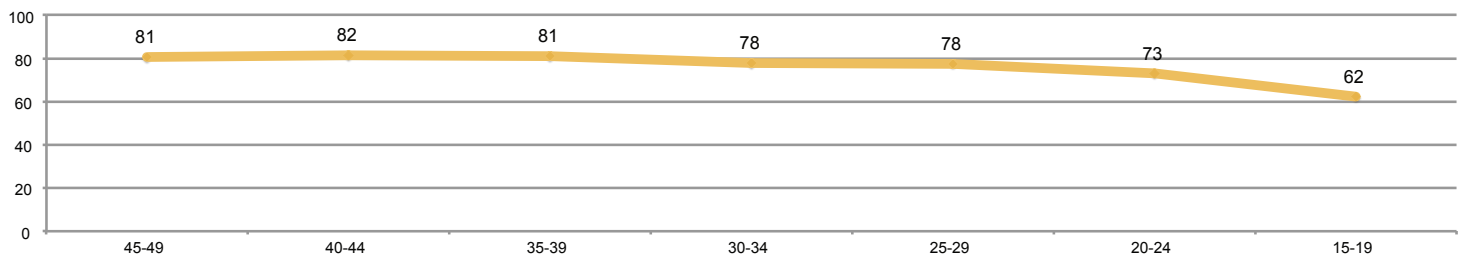


Source for all of the above charts: DHS 2005

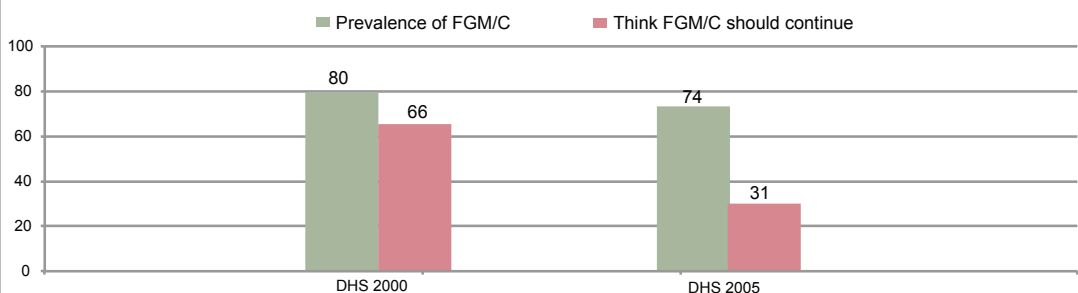
IS THE PRACTICE OF FGM/C CHANGING?

There has been some decline in the prevalence of FGM/C in Ethiopia, with fewer adolescents having undergone the practice compared to older women

Percentage of girls and women aged 15 to 49 years who have undergone FGM/C, by current age



Percentage of girls and women aged 15 to 49 years who have undergone FGM/C, and percentage of girls and women aged 15 to 49 years who have heard about FGM/C and think the practice should continue



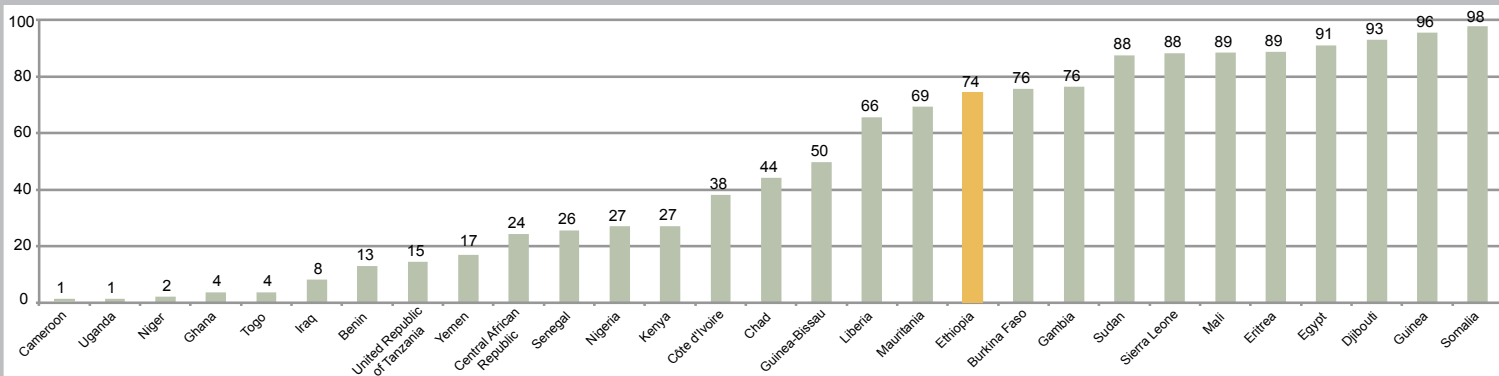
Source: DHS 2005

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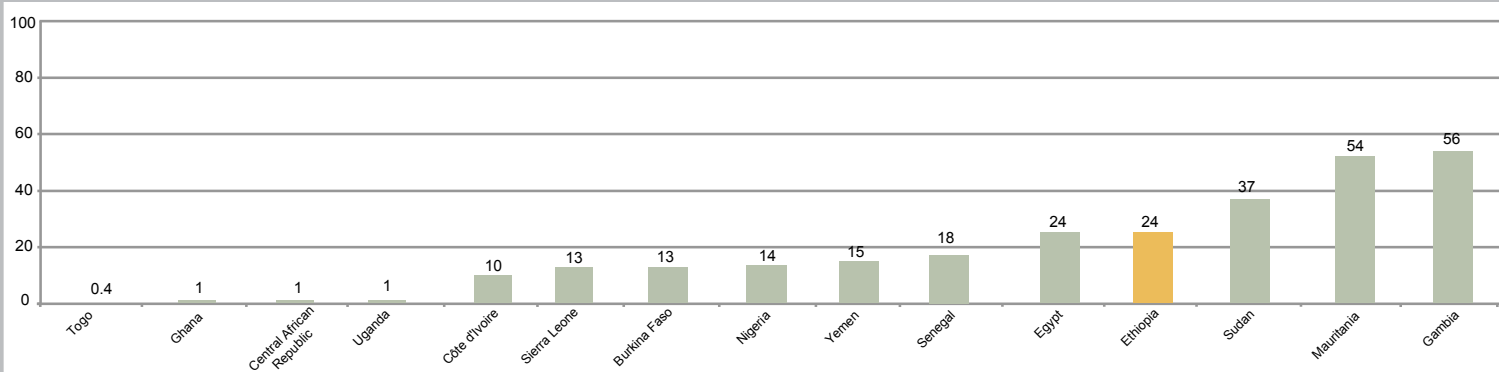


INTER-COUNTRY STATISTICAL OVERVIEW

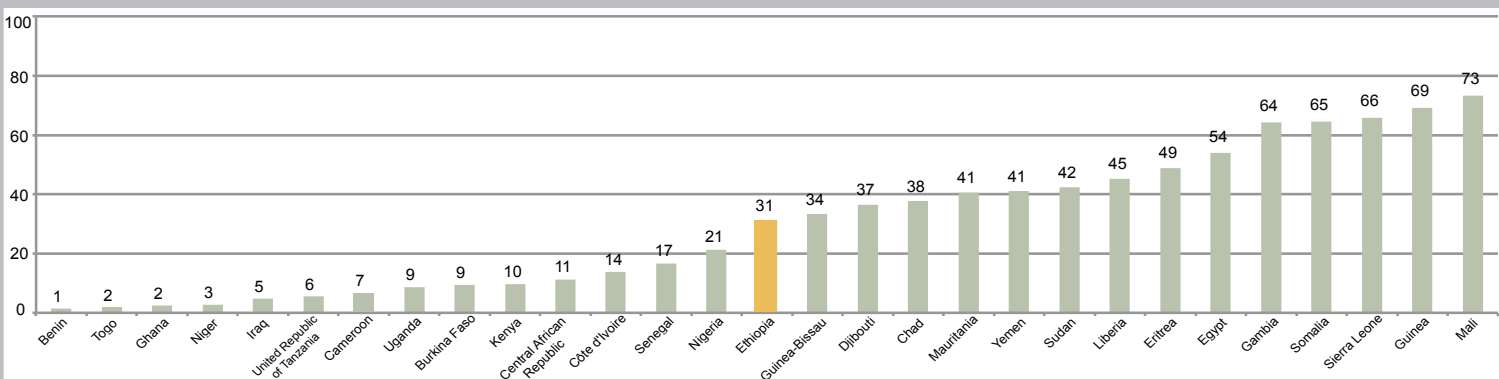
Percentage of girls and women aged 15 to 49 years who have undergone FGM/C



Percentage of girls aged 0 to 14 years who have undergone FGM/C (as reported by their mothers)



Percentage of girls and women aged 15 to 49 years who have heard about FGM/C and think the practice should continue



Notes: Data on attitudes for Yemen refer to ever-married girls and women. In Liberia, girls and women who have heard of the Sande society were asked whether they were members; this provides indirect information on FGM/C since it is performed during initiation into the society. Egypt data refer to girls aged 0-17 years who have undergone FGM/C. Data on attitudes for Ghana are from MICS 2006, for Nigeria from DHS 2008, and for Sierra Leone from DHS 2008 as data from the most recently available MICS surveys are not comparable. In Liberia, only cut girls and women were asked about their attitudes towards FGM/C; since girls and women from practising communities are more likely to support the practice, the level of support in this country as captured by the DHS 2007 is higher than would be anticipated had all girls and women been asked their opinion.

Sources: DHS, MICS, National Social Protection Monitoring Survey, SHHS and Welfare Monitoring Survey, 1997-2012

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FOR MORE INFORMATION

Data and Analytics Section - Division of Policy and Strategy

UNICEF, 3 UN Plaza, New York, 10017

Website: www.childinfo.org Email: childinfo@unicef.org