



# Women Empowerment in Ethiopia

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Barriers to Women Empowerment in Ethiopia:  
Exploring and Understanding the Effects of Cultural Norms and Practices

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## Abstract

Gender inequality has always been an issue in Ethiopia. Women are highly subordinated in every area of society. Despite affirmative action, constitutional law, and a national legislature that fosters women empowerment, the practical standing of women is still that of second-class citizens. Numerous studies have been conducted to assess the primitive causes of gender inequality in Ethiopia. As a result of those studies, valid findings have come to the forefront.

However, a major weakness that appears in virtually all the studies is that they have not shone enough light on the role of cultural norms and practices that stimulate gender inequality in Ethiopia. This research addresses this weakness and shows the fundamental role that cultural norms and practices play in inhibiting women. This study shows the direct relationship between long-held cultural frameworks and the current status of women, who remain subordinate to men. Thus, if the dreams of women empowerment are to be realized, policies need to be drafted that strategically deal with long-held cultural beliefs that confine women. Policy framers need to be thoroughly cognizant of this fact and the extent to which cultural norms and practices are debilitating the status of women.

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## Glossary of Terms and Acronyms

*Cultural Norms and Practices*: Refers to patterns of behavior that are deemed normal and acceptable within a given cultural context. The practices that occur as a result of adherence to societal roles are known as cultural practices.<sup>1</sup>

*DHS (Demographic and Health Survey)*: A data collecting agency that is primarily funded by USAID. It has collected data for 30 years from 90 countries.

*EWLA (Ethiopian Women Lawyers Association)*: The mission of this firm is to legally fight for women's rights.<sup>2</sup>

*Female Genital Mutilation (FGM)*: (also called female genital cutting or female genital mutilation/cutting). Defined by the WHO as referring to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.<sup>3</sup>

*MDG (Millennium Development Goals)*: Eight goals with measurable targets and clear deadlines for improving the lives of the world's poorest people. To meet these goals and eradicate poverty, leaders of 189 countries signed the historic millennium declaration at the United Nations Millennium Summit in 2000. At that

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<sup>1</sup> Manuela Heberle, "Cultural Norms: Definition & Values," Study.com, 2 April 2018. Available from: <https://study.com/academy/lesson/cultural-norms-definition-values-quiz.html>. Accessed 27 May 2020.

<sup>2</sup> "Ethiopia: Meaza Ashenafi - Women's Rights Activist," *Ethiopian Herald*, March 2016.

<sup>3</sup> Country Profile: Female Genital Mutilation (FGM) in Ethiopia. October 2013. Available from: <https://www.refworld.org/docid/54bce29e4.html>. Accessed 21 May 2020.

time, eight goals, ranging from providing universal primary education to avoiding child and maternal mortality, were set with a target achievement date of 2015.<sup>4</sup>

*OAU*: Organization of the African Union

*SDG (Sustainable Development Goals)*: SDGs are a list of goals set by the UN to help achieve gender equality, eradicate poverty, provide access to education, access to health care, economic development, etc., for global citizens. The SDGs also include goals for environmental well-being.<sup>5</sup>

*Women Empowerment*: According to the UN, women empowerment gives women the freedom to advance in their personal, economic, social, educational, health, and political standing.<sup>6</sup>

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<sup>4</sup> “Delivering on Commitments.” MDG Fund. Available from: <http://www.mdgfund.org/>. Accessed 27 May 2020.

<sup>5</sup> “Sustainable Development Goals.” UNDP. Available from: <https://unfoundation.org/what-we-do/issues/sustainable-development-goals/>. Accessed 27 May 2020.

<sup>6</sup> UN Women.org, “Women’s Empowerment Principles: Equality Means Business,” 2011. Available from: <https://www.unwomen.org/en/digital-library/publications/2011/10/women-s-empowerment-principles-equality-means-business>. Accessed 16 December 2016.

## Chapter I

### Problem Statement and Background Information

Ethiopia is a landlocked country located in the horn of Africa and home to more than 109 million people.<sup>7</sup> Ethiopia is known for its distinctive ancient archeology, history, and rich culture. The country is also the home of the Organization of the African Union (OAU). Moreover, Ethiopia has also seen economic growth within this past decade.

According to CNN,

Ethiopia is now Africa's fastest growing economy. Ethiopia's economy is predicted to grow by 8.5% this year. The figures signal continued economic expansion following a long period of impressive growth. In the last decade, Ethiopia has averaged around 10% economic growth, according to the IMF. To boost the economy, the country is pursuing a number of large-scale infrastructure projects, including the Grand Renaissance Dam and a railway network.<sup>8</sup>

However, the benefits of the economic growth have not been equally shared amongst both genders. Ethiopian women have faced and are still facing heavy subordination in Ethiopia. Despite laws and policies that strongly foster gender equality and women empowerment, the law and reality have not come up to par yet. Article 35(1) of the Ethiopian Constitution states:

Women shall, in the enjoyment of rights and protections provided for by this Constitution, have equal rights with men. . . . The historical legacy of inequality and discrimination suffered by women in Ethiopia taken into account, women, in order to remedy this legacy, are entitled to affirmative

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<sup>7</sup> Ethiopia Population (LIVE). United Arab Emirates Population (2018) - Worldometers. Accessed 28 February 2019.

<sup>8</sup> Chris Giles, "Ethiopia is Now Africa's Fastest Growing Economy." CNN, April 24, 2018. Accessed 28 February 2019.

measures. The purpose of such measures shall be to provide special attention to women so as to enable them to compete and participate on the basis of equality with men in political, social and economic life as well as in public and private institutions.<sup>9</sup>

Thus, it is apparent that the Constitution states not just that that men and women are equal; it also states that affirmative measures will be taken to enable women to be equal to men in every area of society.

Nonetheless, serious women's right and empowerment issues like unequal employment and education opportunities compared with men, early child marriage, female genital mutilation (FGM), domestic violence, and more are still widely prevalent in the country. Moreover, it is important to realize that women empowerment issues will have gross implications on limiting the economic, social, and political development of the country.

The purpose of this research is to understand the underlying reasons for why women in Ethiopia are not empowered. The specific questions to be explored are:

- What can be attributed for debilitating the status of women in Ethiopia?
- Despite the availability of vital resources for empowerment, why are not women using them?
- How have cultural norms and practices influenced women's access to fundamental resources?
- Why do harmful traditional practices that are targeted towards women still practiced?
- How do these practices affect women empowerment?

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<sup>9</sup> Constitution of the Federal Democratic Republic of Ethiopia. Article 35, Sec 2.

- What can be done to reduce the negative effects of harmful cultural norms and practices on women empowerment?

Ethiopia lags significantly behind on the issues of gender parity and women empowerment. The evidence clearly shows that there is still a lot of work to do. In 2018, the literacy rate of men 15 and over was 57.2%; for women, it was 41.1%.<sup>10</sup> According to the World Bank's gender portal data 2000-2017, the general employment rate of men shows a notable increase, whereas the employment rate of women showed a small amount of growth.<sup>11</sup> Also, women in general tend to be employed in service-sector jobs which are low-paying occupations by nature. For instance, most women employed in urban areas work in hotels, restaurants, and bars. Professional women with strong education credentials nevertheless still struggle for employment opportunities.<sup>12</sup>

The unequal status between men and women also can be seen in the discrimination women face in land ownership. Men aged 15 to 49 own about 27% of the land in Ethiopia, whereas women in the same age group own about 13%.<sup>13</sup> Furthermore, women who purchase land are given smaller plots compared to male clients. "Female headed households were allocated 1.7 hectares, while male-headed households were

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<sup>10</sup> Ethiopia Literacy, Demographics. Available from: <https://countryeconomy.com/demography/literacy-rate/ethiopia>. Accessed May 16, 2019.

<sup>11</sup> World Bank, Gender Data Portal. Available from: <https://datatopics.worldbank.org/gender/>. Accessed May 17, 2019. .

<sup>12</sup> World Bank, Gender Data Portal.

<sup>13</sup> Helina Beyene, "Final Report, National Assessment: Ethiopia gender equality and the knowledge society," *Women in Global Science and Technology*, 2015.

allocated 2.2 hectares.”<sup>14</sup> Also, female farmers are given the less fertile land compared to male farmers.<sup>15</sup>

The gender disparity in Ethiopia has also led to different health outcomes for men and women. The morbidity rate of women is 76% whereas it is 23% for men.<sup>16</sup> Also, “girls between the ages of 15 and 19 years are seven times more likely to be HIV positive than boys in the same age range.”<sup>17</sup> The reproductive health of women is grave as well: one of fourteen girls in Ethiopia faces possible death during pregnancy and delivery.<sup>18</sup> Although there are major regional variations, the mean number of women giving birth in hospitals is only 16%.<sup>19</sup>

Harmful traditional practices like FGM and early child marriage are still practiced in Ethiopia despite the damage they cause to female health and well-being. On average, 74.3% of girls between the ages 15 and 49 undergo FGM in Ethiopia. In some regions, FGM rates are about 97%.<sup>20</sup>

In order to understand how detrimental FGM is to female health, it is important to know the four types of FGM, since the type of FGM a female undergoes will determine the depth of the adverse health complication she will encounter. The first type requires cutting a part of the clitoris, the second types entails removing the entire clitoris, the third

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<sup>14</sup> Hirut Girma, and Renée Giovarelli, “The Gender Implications of Joint Titling,” *Focus on Land*, 2019.

<sup>15</sup> Girma and Giovarelli, “Gender Implications.”

<sup>16</sup> World Health Organization, “Analytical summary—Gender and Women’s Health.” n.d.

<sup>17</sup> World Health Organization, “Analytical summary.”

<sup>18</sup> Chaya Nada. “Poor Access to Health Services: Ways Ethiopia is Overcoming It.” 2007.

<sup>19</sup> Beyene Helina. “Final report national assessment: Ethiopia Gender Equality and the Knowledge Society.” *Women in Global Science and Technology*, 2015.

<sup>20</sup> “Country Profile: FGM in Ethiopia,” *28toomany*, October 2013.

type entails removing the clitoris and sewing up the vagina and the fourth one entails piercing, tearing, and partially burning vital parts of the female genitalia.<sup>21</sup> Women who undergo the third and fourth types of FGM suffer severe health complications such as being unable to urinate, unable to have sex, loss of blood, vaginal infections, cysts, fistula, and possible death.<sup>22</sup> In some regions of Ethiopia, about 90% of the women suffer through the third type of FGM. A direct correlation between FGM and high infant and maternal mortality in Ethiopia has also been observed.<sup>23</sup>

In 2016 in both urban and rural areas of Ethiopia, 41% of girls who are married are under the age of 18. In some regions like the Amhara, the mean age girls get married is 15, and they typically marry men who are at least 15 years older.<sup>24</sup> Early child marriage has been linked to high maternal mortality, with girls under 15 being five times more likely to die of pregnancy-related causes than adult women.<sup>25</sup> Young brides also have a 50% chance of contracting sexually transmitted diseases compared to adult women.<sup>26</sup> Child marriage also reduces the possibility of economic independence and prosperity for girls.<sup>27</sup>

From the evidence demonstrated thus far, it has been firmly established that the status of men and women is unequal despite the national laws which perpetrate women

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<sup>21</sup> “Country Profile: FGM in Ethiopia.”

<sup>22</sup> “Country Profile: FGM in Ethiopia.”

<sup>23</sup> “Country Profile: FGM in Ethiopia.”

<sup>24</sup> Elizabeth Presler Marshall, Minna Lyytikainen, Nicola Jones, et al., “Child Marriage in Ethiopia.” UNICEF, March 2016.

<sup>25</sup> Marshall, et al., “Child Marriage in Ethiopia.”

<sup>26</sup> Marshall, et al., “Child Marriage in Ethiopia.”

<sup>27</sup> Marshall, et al., “Child Marriage in Ethiopia.”



empowerment. The evidence also shows the negative effects and wide prevalence of harmful traditional practices like FGM and child marriage.

Even though the evidence shines light on the disparate outcomes for men and women in every research sector considered here, it has been cumbersome to find literature that shows the extent to which cultural norms and practices have caused the current status of Ethiopian women. Despite the fact that numerous studies demonstrate that men and women are unequal in Ethiopia, they do not elaborate clearly the degree to which cultural norms and practices influence these trends.

Therefore, the purpose of this thesis is to show to what extent cultural norms and practices result in the trends that have disenfranchised women. However, before these effect of cultural norms and practices are discussed, we must first have a thorough understanding of what *empowerment* means in light of specific metrics and the role of cultural relativism in setting bounds for empowerment.

## Chapter II

### Empowerment Metric and Cultural Relativism

One of the goals of this study is to assess women's empowerment in Ethiopia. However, in order to accurately assess that we need to first have a clear definition of what empowerment means. Moreover, as stated earlier, women's empowerment is primarily a social issue. It would be quite cumbersome to assess social issues without first assessing the lens that focuses them. This is where cultural relativism comes into play. When assessing social issues, simply discounting cultural relativism makes us miss a big part of the picture. Anthropological studies have shown that human beings co-exist within cultural bounds. A person's mortality and rationality usually stem from the cultural beliefs to which that person adheres. This chapter will explain the metric of empowerment that is used for this study and explain the role of cultural relativism is influencing that metric.

The approach used to define empowerment for this study was Amartya Sen's Capability framework, which provides the fundamental substances required to understand what empowerment really means. In "Development as Freedom," Sen states that given that the purpose of economic growth and progress is to enhance the lives of citizens, people (the entire population of a country) should not be seen as means of development but rather as ends to development.<sup>28</sup> Thus the capability approach sees human life as a set of "doings and beings"—we can call them "functionings." It relates the evaluation of the

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<sup>28</sup> Amartya Sen, "Development as Capability Expansion." In: S. Fukuda-Parr, et al., *Readings in Human Development* (New York: Oxford University Press, 2003), 42.

quality of life to the assessment of the capability to function.<sup>29</sup> Sen means that “functionings” are the ability of an individual to function the right way. For instance, if an individual is not able to obtain an education because of circumstances beyond his/her control (e.g., parents are unable to pay for school), their proper “functioning” has been negatively altered.

Sen further elaborates “functionings” as follows:

In the view that is being pursued here, the constituent elements of life are seen as a combination of various different functionings. This amounts to seeing a person in as it were, an “active” rather than a “passive” form (but neither the various states of being nor even the “doings” need necessarily be “athletic” ones). The included items may vary from such elementary functionings as escaping morbidity and mortality, being adequately nourished, undertaking usual movements etc., to many complex functionings such as achieving self-respect, taking part in the life of the community and appearing in public without shame.<sup>30</sup>

Then Sen presents his capability approach by saying:

The primitive notion in the approach is that of functionings—seen as constitutive elements of living. A functioning is an achievement of a person: what he or she manages to do or to be, and any such functioning reflects, as it were, a part of the state of that person. The capability of a person is a derived notion. It reflects the various combinations of functionings (doings and beings) he or she can achieve. It takes a certain view of living as a combination of various “doings and beings.” Capability reflects a person’s freedom to choose between different ways of living. The underlying motivation—the focusing on freedom—is well captured by Marx’s claim that what we need is “replacing the domination of circumstances and chance over individuals by the domination of individuals over chance and circumstances.”<sup>31</sup>

Thus, we can see clearly that Sen’s capability approach goes hand in hand with empowerment. When assessing empowerment from the lens of the capability approach,

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<sup>29</sup> Sen, “Development,” 42.

<sup>30</sup> Sen, “Development,” 42.

<sup>31</sup> Sen, “Development,” 42.

we can understand that anything that hinders a person's functionality makes them incapable of achieving anything. When a person's lifespan, health, education level, and the like, are constrained by factors outside that individual's control, there is a problem. Thus, when external influences exert control or influences over someone's power to enhance their functioning, we can say they are disempowered. Moreover, Sen states: "It should be noted also that there is always an element of real choice in the description of functionings, since the format of 'doings' and 'beings' permits additional 'achievements' to be defined and included."<sup>32</sup> Therefore, the more functionings a person has, the more they are able to do and be.

But when grasping this idea, an important question comes to the fore: What if people believe they have already done and achieved what they would like and are satisfied with where they are in life, even though it may seem quite contrary to their circumstance? Sen tackles this idea by saying:

A thoroughly deprived person leading a very reduced life, might not appear to be badly off in terms of the mental metric of utility, if the hardship is accepted with nongrumbling resignation. In situations of long-standing deprivation, the victims do not go on weeping all the time, and very often make great efforts to take pleasure in small mercies and to cut down personal desires to modest—"realistic"—proportions. The person's deprivation, then, may not at all show up in the metrics of pleasure, desire, fulfillment, etc., even though he or she may be quite unable to be adequately nourished, decently clothed, minimally educated and so on.<sup>33</sup>

Given that human beings are extremely adaptive creatures, they can somehow adapt to circumstances that deprive their functionings.

Even though it is quite clear that people who are not able to escape gross external circumstances eventually learn to adapt to it, there is also another important question to

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<sup>32</sup> Sen, "Development."

<sup>33</sup> Sen, "Development."

ponder: If people do have a means of escape, what validates seeking for contentment in a depraved circumstance when in reality those circumstances can be averted?<sup>34</sup> What is that powerful yet subtle force that counsels, encourages, and in many cases forces people to be confined to a certain standard of living? The answer is culture.

Thus far, we have used Sen's *functioning* metric to understand empowerment. It has shown us that a person's functioning directly affects their level of being and doing. However, what directly affects functioning itself is usually culture. For example, whether or not an individual gets healthcare, an education, and/or chooses when to marry, all are subject to the cultural beliefs with which that person identifies.

When it comes to the concept of culture, it is recognized that culture cannot be viewed through the lens of homogeneity for this entire world. Culture is highly subjective, and even though this world comprises significantly diverse cultures that cannot be easily enumerated, the culture a person represents and the role that person is deemed to play does affect his or her degree of functionality. Cultural norms and practices are not universal, therefore in order to have an accurate idea of the role of culture on empowerment we first need to understand cultural relativism.

Cultural relativism, a concept coined by Franz Boaz, states that different cultures have different frames of reference that influence behavior. More precisely, each culture has its own standard and definition of morality, rationality, and way of life.<sup>35</sup> Cultural relativism asserts that there are not universal norms; rather, norms are subjective to culture.

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<sup>34</sup> Sen, "Development."

<sup>35</sup> Ruth Benedict, *Patterns of Culture* (Boston: Houghton Mifflin, 2005).

According to Ruth Benedict, “No man ever looks at the world with pristine eyes. He sees it edited by a definite set of customs and institutions and ways of thinking. Even in his philosophical probings he cannot go behind these stereotypes; his very concepts of the true and the false will still have reference to his particular traditional customs.”<sup>36</sup> Benedict argues that the “definite set of customs” a person adheres to, what is true and acceptable to an individual, comes from the community into which an individual is born. The cognitive process in which truth and acceptability are defined is different amongst all cultures.<sup>37</sup> John Tilley argues that the judgments we make as individuals are a predisposition from our cultural frameworks. He states: “The relativity of the judgment derives from the relativity of moral truth . . . and every moral judgment is culturally relative.”<sup>38</sup>

Cultural relativism provides the necessary grounding for a person’s functioning. In some cases, one of the basic functionings—the right to live—is dictated within the cultural bounds that person represents. Tilley states that according to Meeto, in some cultures honor killings are justified for women who have committed sexual immorality (e.g., sex before marriage, a marital affair). Pregnancy due to incest or rape does not abrogate honor killings. The person who implements the honor killing is usually a sibling, parent, or extended family member.<sup>39</sup> According to Meeto, 5,000 women are murdered annually because of honor killings.<sup>40</sup> Honor killings have been implemented in

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<sup>36</sup> Benedict, *Patterns of Culture*.”

<sup>37</sup> Benedict, *Patterns of Culture*.”

<sup>38</sup> John Tilley, “Cultural Relativism,” *Human Rights Quarterly* 22 (2000):501–547. Available at” PhilArchive: <https://philarchive.org/archive/TILCR>.

<sup>39</sup> MeeToo, cited in Tilley, “Cultural Relativism.”

<sup>40</sup> MeeToo, cited in Tilley, “Cultural Relativism.”

“Bangladesh, Brazil, Ecuador, Egypt, India, Israel, Italy, Jordan, Morocco, Pakistan, Sweden, Turkey, Uganda and the UK.”<sup>41</sup> The reason why certain communities view honor killing as morally justified is because a woman who is accused of sexual immorality supposedly brings unbearable shame on the family, thus the punishment is death.

Given that humans coexist within cultural bounds, there is no doubt that the notions of empowerment and who is to be empowered vary within respective cultural frameworks. Empowerment of women in Ethiopia is not an exception. The fact that cultural beliefs and practices influence contextual proclivities of the definition and practice of women empowerment throughout the world is an indisputable truth. Thus, in the case of Ethiopia, it is critically important to understand the degree to which cultural norms and practices are debilitating women empowerment. Understanding the extent is pivotal in order to devise feasible solutions. The next chapter assesses a range of scholarly works that discuss the role of cultural norms and practices and how they often create roadblocks for women in different parts of society.

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<sup>41</sup> MeeToo, cited in Tilley, “Cultural Relativism.”

### Chapter III

#### Literature Review

Article 35 of the Ethiopian Constitution was explicitly written to empower women and to grant them affirmative rights. The historical as well as contemporary trends of oppression and inequality have continually thwarted women from embracing political, social, and economic freedoms. However, one must ask: despite the inclusion of Article 35 into the constitution, why do women in many areas of Ethiopia still face heavy subordination? Why is progress toward woman empowerment in many societal spectrums still very slow? Why has not the law taken a foothold in society? What is the grass-roots problem? Although there has been no satisfactory answer to these questions, many scholars have studied the principles that surround this question. I have presented a relevant selection below.

Lovise Aalen provides the pivotal framework to help answer the crucial questions posed above. Aalen said: “Informal institutions, such as clientelism and patrimonialism, may play an even more important role than formal institutions in shaping political behavior and outcomes.”<sup>42</sup> Ethiopia is currently an ethnic federation, which came about when the government granted self-determination to the nine major ethnic groups. “The introduction of self-determination in 1991 resulted in subdivision of the country into different regional states, each with the right to exercise independent law making,

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<sup>42</sup> Lovise Aalen, *The Politics of Ethnicity in Ethiopia: Actors, Power and Mobilization under Ethnic Federalism* (Leyden, Netherlands and Boston: Brill, 2011), 3.



executive, and judicial powers.”<sup>43</sup> So, if informal institutions are stronger than formal politics, what are the implications for women’s rights? This question, as important as it is, is not answered in Aalen’s book, which is a major limitation of the book. When dedicating an entire book to the examination of the politics of one country, instead of discussing the structure only, I believe it is important to explain the effect that structure will have on historically marginalized groups. Given that Aalen is a well attributed political scientist who has done research on Ethiopian politics for more than ten years, her inferences on this issue would have been very important.<sup>44</sup>

This gap in Aalen’s book is covered by another Ethiopian researcher named Abate Alemayehu. His research found that granting self-determination to the ethnic groups provided them with the opportunity to continue with their older customary and religious laws.<sup>45</sup> These laws, which are very conservative by nature, are formulated from long-held cultural beliefs and practices, and the laws are contrary to the principles of women empowerment.<sup>46</sup>

Hussein Ahmed Tura, a law lecturer at Ambo University in Ethiopia, further breaks apart and elaborates this notion. He stated that cultural beliefs enshrined in Wolaita (a rural region in Ethiopia) customary law do not accept a women’s right to own

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<sup>43</sup> Aalen, *Politics of Ethnicity*, 5.

<sup>44</sup> “Political Scientist Focusing on Democracy, Governance and Women’s Employment and Empowerment in the Horn of Africa.” Chr. Michelsen Institute, Norway. n.d. Available from: <https://www.cmi.no/staff/lovise-aalen>. Accessed 28 May 2020.

<sup>45</sup> Abate Nikodimos Alemayehu, “Ethnic Federalism in Ethiopia: Challenges and Opportunities.” University of Lund, 2004: 56. Available from: <https://www.semanticscholar.org/paper/Ethnic-Federalism-in-Ethiopia%3A-Challenges-and-Alemayehu/ec5a9050b0f3015aebd0444574593c005d07ced7>. Accessed 28 May 2020.

<sup>46</sup> Alemayehu, “Ethnic Federalism in Ethiopia.”

property.<sup>47</sup> Even though national laws prohibit infringement on a women's right to own land, Tura found that customary laws have the upper hand in deciding whether or not women will own land. In one of his articles, Tura said: "Women do not have a customary right to inherit land from their family; and the control of land during marriage falls chiefly under the control of their husband."<sup>48</sup> As a result of such cultural norms, women rarely own land in Wolaita.

In order to allow more women to own land, the federal government introduced joint titling for married couples.<sup>49</sup> However, some regions did not implement the policy because it was not in adherence with their customary beliefs which perpetuated the idea that only men should own land.<sup>50</sup> In Oromia, the largest region of Ethiopia, "a higher number of certificates were issued exclusively in the name of the husband."<sup>51</sup> Other regions like the Tigray did the same thing.<sup>52</sup>

Furthermore, the patriarchal nature of cultural beliefs has also hindered a women's access to healthcare.<sup>53</sup> In Ethiopia, maternal mortality is high. According to research by Lindstrom and Biratu, husbands do not allow their wives to visit a physician for pre-natal checkups in the rural regions of Ethiopia. According to B. Biratu and D. Lindstrom, "restrictions on women's health-seeking behavior stemming from a husband's

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<sup>47</sup> Hussein Ahmed Tura, "A Woman's Right To and Control Over Rural Land in Ethiopia: The Law and the Practice," *International Journal of Gender and Women's Studies*, June 2014. Available from: <https://land.igad.int/index.php/documents-1/countries/ethiopia/gender-1/96-a-woman-s-right-to-and-control-over-rural-land-in-ethiopia-the-law-and-practice/file>. Accessed 28 May 2020.

<sup>48</sup> Tura, "A Woman's Right To and Control Over Rural Land in Ethiopia."

<sup>49</sup> Girma and Giovarelli, "The Gender Implications of Joint Titling."

<sup>50</sup> Girma and Giovarelli, "The Gender Implications of Joint Titling."

<sup>51</sup> Girma and Giovarelli, "The Gender Implications of Joint Titling."

<sup>52</sup> Girma and Giovarelli, "The Gender Implications of Joint Titling."

<sup>53</sup> "Country Profile: FGM in Ethiopia."

disapproval remain as important barriers to prenatal care utilization even in areas where services are available.”<sup>54</sup>

Moreover, cultural practices like FGM and child marriage are widely espoused by various ethnic groups in Ethiopia. According to an article titled “Ethnic Challenges to the Nation State: Studying State Responses From a Human Rights Perspective,” the new ethnic federal system introduced by the Ethiopian People's Revolutionary Democratic Front (EPDRF) has also resulted in a negative effect on women in particular ethnic groups, by reviving certain traditional practices like abduction or kidnapping of brides as well as FGM.<sup>55</sup> According to Preston Mitchum, FGM is a fundamental cultural practice because women who refuse to undergo FGM will be considered sexually immoral and unaesthetic, thus jeopardizing their chances of marriage.<sup>56</sup> The cultural justifications for child marriage are dowry and status quo. Dowry is given based on assurances that the women is subservient. The bride’s family receives money from the groom after their daughter is married. Parents whose daughters are not married at a younger age face social stigma due to the belief that girls who do not get married early will be sexually immoral and the family will be shamed for having a “sexually unstable” daughter.<sup>57</sup>

It is important to note that cultural norms confine the economic growth of women in Ethiopia. This confinement is clearly described in the book, *The Microfinance Mirage:*

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<sup>54</sup> B. T. Biratu, and D. P. Lindstrom, “The Influence of Husbands’ Approval on Women’s Use of Prenatal Care: Results from Yirgalem and Jimma Towns, South West Ethiopia,” *Ethiopian Journal of Health Development*, vol. 20, no. 2, 2006. Available from: <https://www.ajol.info/index.php/ejhd/article/view/10017>. Accessed 28 May 2020.

<sup>55</sup> “Ethnic Challenges to the Nation State: Studying State Responses From a Human Rights Perspective,” Carleton University, n.d.

<sup>56</sup> Preston Mitchum, “Slapping the Hand of Cultural Relativism: Female Genital Mutilation, Male Dominance, and Health as a Human Rights Framework,” *William and Mary Journal of Women and the Law*, 19 (2013): 585.

<sup>57</sup> Marshall, et al, “Child Marriage in Ethiopia.”

*The Politics of Poverty, Social Capital and Women's Empowerment in Ethiopia* by Esayas B. Geleta. Although the purpose of the book was to assess the effectiveness of microfinance in Ethiopia, it also demonstrated that certain codes of conduct for women debilitated their ability to improve their economic stance via microfinance.<sup>58</sup> In rural regions of Ethiopia, microfinance customers usually buy products (cattle, chicken, traditional baskets) and sell them for a profit. However, selling products with a high profit yield (e.g., cattle) is reserved exclusively for male microcredit clients. Even though women are the principal agents in raising cattle, they cannot sell those cattle because the business niche of women is to sell petty products with small profit yields.<sup>59</sup> In the Amhara region where Geleta conducted the research, such stereotypical beliefs about a women's business niche is strongly enforced. Women who decide to break out from such conventional belief patterns are seen to have committed a taboo, which would result in her and her family being ostracized.<sup>60</sup> Geleta's book argues that even though women have the means for empowerment, nevertheless cultural norms are more powerful in determining the level of empowerment that women can attain. The heavy burden of cultural norms and practices on women empowerment ought not to be overlooked. Even though resources and legislative frameworks are important elements in aiding women empowerment, the presence of strong cultural obstacles may render all women empowerment initiatives useless.

As we have seen from the literature reviews above, whether or not women will own land, visit a physician, pursue a certain business niche is all determined within the

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<sup>58</sup> Esayas B. Geleta, *The Microfinance Mirage: The Politics of Poverty, Social Capital and Women's Empowerment in Ethiopia* (Routledge, 2015), 100.

<sup>59</sup> Geleta, *The Microfinance Mirage*, 100.

<sup>60</sup> Geleta, *The Microfinance Mirage*, 104-105.

scope of the cultural framework designed for women in Ethiopia. Cultural beliefs and practices are so strong that ethnic groups across Ethiopia formed laws that favor these practices. From the literary works reviewed thus far, there are compelling arguments to show that cultural beliefs and practices have been a burden to women empowerment in Ethiopia. However, the extent to which it is directly responsible for the current status of women has not been empirically demonstrated quantified yet. That is the objective of this research.

## Chapter IV

### Research Methods

Generally available datasets pertaining to the United Nations Millennium Development Goals (MDGs) illustrate general trends regarding the degree of gender parity between men and women in Ethiopia. However, general trend data are not sufficient to either support or refute the research question. This research required an in-depth analysis of particular variables that will be stated in this chapter. Even though the UN MDGs were used in this research for the sake of comparison or elaboration, they were not the main data source. Rather, the Demographic and Health Surveys (DHS) dataset, which provides raw data pertaining to the status of Ethiopian women, was the main data source used to test the hypotheses.

The DHS program is a data collecting agency primarily funded by the U.S. Agency for International Development (USAID). The agency has collected data for 90 countries for more than 30 years. Within the DHS, highly qualified professionals do a remarkable job of collecting data. The DHS program in Ethiopia amassed data from the urban and rural regions of the country. Agency literature describes it this way:

The DHS Program works with governments to collect and share key information about people, their health and their health systems. This includes information on infant and child mortality, fertility, family planning use, maternal health, child immunization, malnutrition levels, HIV prevalence, and malaria. Anyone can access the data from these surveys, and the indicators are comparable over time and across countries. Governments, donors, researchers, and civil society (such as faith-based organizations and other domestic and international organizations) use the information from these surveys to inform health-related programming,

policies, funding priorities, and research. The DHS Program, developed and supported by the American People through USAID, is now the largest and longest enduring survey program of its kind.<sup>61</sup>

To gather data for this research, men and women from different regions (primarily urban and rural areas) were examined across the variables that will be provided in this chapter. The independent variables in this study were gender (men and women) and location (urban and rural). The dependent variables were education, early child marriage and birth, female health, domestic violence, and employment.

Education was assessed on the basis of females to males in elementary, secondary, and higher education. For elementary school, it is expected the results will show that enrollment is approximately the same for boys and girls. However, as education level rises, the expectation is that the percentage of female enrollment compared to male enrollment will decline significantly. The reason why it is important to assess this variable is because education is a key instrument in supplementing women empowerment, paving the way for women to achieve a better position in their economic, political, and social stance. Furthering assessing this variable can also show to what extent cultural burdens affect female education.

The effects of early child marriage on women empowerment will be assessed. Early child marriage and birth are common cultural practices in Ethiopia. Therefore, understanding their implications will help us contemplate the degree to which these cultural trends affect women empowerment.

Another variable to be assessed is the health outcomes of women vis-à-vis HIV and STDs, fistula, and maternal mortality. The prevalence of these three health

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<sup>61</sup> USAID, “The Demographic and Health Surveys Program,” 7 March 2018.

catastrophes has been linked to the cultural practice of early child marriage and birth. Therefore, understanding the effects of early child marriage and birth in promulgating these health outcomes will help us understand the role cultural norms and practices have on female health.

Health is an important element in fostering women empowerment because it helps women uphold their basic rights and their right to live. The more healthy every woman is, the longer she will live, thus obtaining the means to achieve more by getting an education, decent employment, or running for political office.

The ability of women in urban and rural areas to use contraceptives is examined in this research. In general, women in urban areas expect to have more right to decide on the use of contraceptives in comparison to their rural counterparts. This is because women residing in rural areas are more subject to strong cultural beliefs against contraceptives. Understanding this variable is important because an important element in women's right is bodily rights. Women need to have the right to choose when and with whom to have a baby as well as the right to be protected from STDs.

Domestic violence is an important human rights issue. Unfortunately, women across Ethiopia are victims of violence by an intimate partner. Therefore, understanding the roles that cultural norms and practices play in perpetrating such violence can help identify viable solutions. This is why assessing this variable is important.

Lastly, for the working-age group in Ethiopia, research shows that employment is much higher for males than for females. It is pivotal to understand whether or not cultural norms and practices are promulgating this trend. In general, the expectation is that there will be more employment in urban areas when compared to rural, also that men will have



a higher employment rate in both urban and rural areas compared to women. It is also expected that women living in urban regions will have a higher rate of employment in comparison to women who live in rural regions. Furthermore, employment plays an important role in financial empowerment, showing the extent to which women are not solely confined to traditional, gender-prescribed roles.

Table 1 below outlines each variable and the factors to be analyzed. Chapter V will analyze the variables discussed in this chapter.

Table 1. Five Variables, with Factors to be Analyzed.

Education	Early Child Marriage and Birth	Female Health	Domestic Violence	Employment
<ul style="list-style-type: none"> <li>• Overall progress 2000-2016</li> <li>• Progress for females &amp; males 2000-2016</li> <li>• Trends in urban &amp; Rural areas, 2000-2016</li> <li>• Gender &amp; location trends</li> <li>• Summary of results</li> <li>• Education and women empowerment</li> </ul>	<ul style="list-style-type: none"> <li>• Overall progress, 2000-2016</li> <li>• Early child marriage trends by location, 2000-2016</li> <li>• Early child birth trends, by location, 2000-2016</li> </ul>	<ul style="list-style-type: none"> <li>• HIV and STDs</li> <li>• Fistula</li> <li>• Maternal Mortality</li> </ul>	<p><i>Beatings are justified if the wife:</i></p> <ul style="list-style-type: none"> <li>• argues with husband, 2000-2016</li> <li>• burns the food, 2000-2016</li> <li>• goes out of the house without telling him, 2000-2016</li> <li>• neglects the children, 2000-2016</li> <li>• refuses to have sex</li> </ul>	<ul style="list-style-type: none"> <li>• Overall employment trends in Ethiopia, 2000-2016</li> <li>• Employment trends by location and gender</li> <li>• Payment for work done</li> </ul>

## Chapter V

### Data Analysis

Table 1 in the previous chapter outlined five variables, and the factors associated with each variable. The variables are Education, Early Child Marriage and Birth, Female Health, Domestic Violence, and Employment. Each of the variables and associated factors will be analyzed in this chapter.

#### Education, 2000-2016

One of the eight United Nations MDGs is to achieve universal primary education. This goal is designed to “ensure that children universally, including both boys and girls, will be able to complete a full course of primary education by 2015.”<sup>62</sup> In Ethiopia, first grade to eighth grade is considered primary school. According to an MDG assessment report on Ethiopia:

Ethiopia has done quite well in terms of meeting university primary education targets over the last decade and is on track to achieve this goal. The Net Enrollment Ratio (NER) in the lower primary school cycle (grades 1–4) increased from 77.5% in 2004-05 to 92.2% in 2011-12 and in the upper cycle of primary education (grades 5–8) from 37.6% to 48.1% during the same period. Overall, the NER for primary education (grades 1–8) increased from 77.5% in 2005-06 to 85.4% in 2011-12. The primary school attendance ratio has risen from 30.2% in 2000-01 to 64.5% in 2010-11. The increase in attendance was disproportionately higher for children from rich families at 70% compared to 52% for children from poor families. Most of these children drop out of school after grade five although dropout rates have been declining. For example, the completion

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<sup>62</sup> MDG Monitor, “MDG 2: Achieve Universal Primary Education,” May 17, 2017. Available from: <https://www.mdgmonitor.org/mdg-2-achieve-universal-primary-education/>. Accessed 1 June 2020.

rate in lower primary education rose from 69.1% in 2010-11 to 73.8% in 2011-12 and is expected to increase.<sup>63</sup>

In this thesis I take a detailed look at the national progress of Ethiopia toward universal child education in order to make clear and evidence-based statements. The next section examines general trends of primary school education as well as trends by location and gender.

### Overall Progress

In 2000, the overall percentage of Ethiopians who completed primary education was 12.99%. By 2016, the rate increased to 24.75%—a positive difference from 2000 to 2016. Thus, even if the goal were not universally achieved, the percentage of people who complete primary education has doubled within this time period.<sup>64</sup>

### Progress for Females and Males

In 2000, the percentage of girls who completed primary education was 13.96%, while the percentage of boys was 22.78%. A two-pair sample test was undertaken to compare the primary school completion rates for boys and girls. It found a significant difference between primary school completion rate for girls ( $m=0.1396$ ,  $SD=0.34654$ ) and boys ( $m=0.2278$ ,  $0.41940$ ). In 2016, the percentage of girls who completed primary education was 19.60%, while the percentage of boys was 30.03%.

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<sup>63</sup> “MDG 2: Achieve Universal Primary Education.”

<sup>64</sup> It was impossible to merge the 2000 and 2016 data to test for significance of the results.

Likewise, a two-pair sample test was conducted to compare the primary school completion rates for boys and girls. There was a significant difference between primary school completion rate for girls ( $m=0.1960$ ,  $SD=0.39697$ ) and boys ( $m=0.3003$ ,  $0.45838$ ).

Overall, comparing the general data, I argue that the MDGs have been successful in promoting primary school completion because the data show that the primary school completion rate has increased for both girls and boys from 2000 to 2016.

#### Trends in Urban and Rural Areas

In both urban and rural areas, primary school education has increased. In 2000, the primary school completion rate in urban areas was 24.08%; by 2016, it was 30%. In 2000, the primary school completion rate in rural areas was 10% but by 2016, it was 23.5%. Thus, there was a notable increase in primary school enrollment for both regions areas, urban and rural

#### Trends in Gender and Location

In 2000, the percentage of women who completed primary school education was 28.33% in urban areas and 6% in rural areas. An independent-sample t-test was conducted to compare the primary school completion rate in urban and rural areas. For this test, equal variances were not assumed.

There was a significant difference in the percentages for primary school completion rate for girls in urban areas ( $M= 0.2833$ ,  $SD=0.45064$ ) and rural areas ( $m= 0.1143$ ,  $SD=0.31824$ ). Regarding data for boys, 25.58% completed primary school education in urban areas and 22.20% completed primary school education in rural areas.

An independent-sample t-test was conducted to compare the primary school completion rate in urban and rural areas. For this test, equal variances were not assumed. There was a significant difference in the percentages of primary school completion rate for boys in urban areas ( $m= 0.2558$ ,  $SD=0.43635$ ) and rural areas ( $m= 0.2220$ ,  $SD=0.41560$ ).

In 2016—approximately 15 years after the implementation of the MDGs—the percentage of girls who completed primary school education in urban areas was 32.30% and in rural areas it was 17.28%. An independent-sample t-test was conducted to compare the primary school completion rate in urban and rural areas. For this test, equal variances were not assumed. There was a significant difference in the percentages for primary school completion rate for girls in urban areas ( $M= 0.3230$ ,  $SD=0.46765$ ) and rural areas ( $m= 0.1728$ ,  $SD=0.37806$ ).

The percentage of boys who completed primary school education in 2016 was 28% in urban areas and 30.43% in rural areas. An independent-sample t-test was conducted to compare the primary school completion rate in urban and rural areas. For this test, equal variances were not assumed. There was a significant difference in the percentages for primary school completion rate for boys in urban areas ( $m= 0.2800$ ,  $SD=0.44903$ ) and rural areas ( $m= 0.3043$ ,  $SD=0.46010$ ).

#### Summary of Data

As we can see from the data, in general the MDGs were successful in increasing primary school completion in both urban and rural areas from 2000-2016 for both girls and boys. In 2000 and 2016 in urban areas, more girls completed primary school as

compared to boys. However, a significantly higher percentage of boys completed primary school compared to girls in 2000 and 2016 overall, especially in rural regions.

Thus, even though the MDGs were able to increase primary school completion rates, the success was disproportionate. In rural areas, despite the overall increase in primary school completion, the rate of completion for boys is about twice the rate of completion for girls. Moreover, since Ethiopia comprises mostly rural areas, the data from the rural areas more accurately represent the country. This is also a clear indication that more work needs to be done to make the success more proportionate.

Table 2. Summary of Primary School Education.

	Urban	Rural
2000 (girls)	28.33	11.43
2016 (girls)	32.30	17.28
2000 (boys)	25.58	22.20
2016 (boys)	28.00	30.43

Source: thesis author

### Women Empowerment and Education, 2000–2016

Another goal of the MDGs was to “promote gender equality and empower women,” and one of the factors for achieving this goal was “to eliminate gender disparity in primary and secondary education by 2005 and in all levels of education by 2015.”<sup>65</sup>

<sup>65</sup> World Health Organization, “MDG 3: Promote Gender Equality and Empower Women,” 9 December 2010. Available from: [https://www.who.int/topics/millennium\\_development\\_goals/gender/en/](https://www.who.int/topics/millennium_development_goals/gender/en/). Accessed 1 March 2019.

However, to achieve this goal, more women need to pursue secondary and higher education. In 2000, the percentage of girls who completed secondary education was 35.95%, while the percentage of boys who completed secondary education was 49.09%.

A paired sample test was conducted to compare the means of the two groups. The results show there was a high significance of the means of the secondary school completion rate for girls ( $m=0.3595$ ,  $SD=0.47989$ ) and for boys ( $m=0.4904$ ,  $SD=0.49997$ ). In 2016, the percentage of girls who completed secondary school education was 19.48% and the percentage of boys who completed secondary school education was 26.69%.

In addition, a paired sample test was conducted to compare percentages. The results show that the completion rate percentages for girls ( $m=0.1948$   $SD=0.39606$ ) and boys ( $m=0.2669$ ,  $SD=0.44239$ ) were highly significant. The results show that secondary school completion declined for both girls and boys, but more so for girls.

When looking at means for regional divides, the results are more interesting. In 2000, among all the girls who were enrolled in secondary school, 45.67% of girls in urban areas and 9.1% in rural areas had completed primary. An independent-sample t-test was conducted to compare the secondary-school completion rate in urban and rural areas. For this test, equal variances were not assumed. There was a significant difference in the percentages for secondary school completion rate for girls in urban areas ( $M= 0.4567$ ,  $SD=0.49819$ ) and rural areas ( $m= 0.0911$ ,  $SD=0.28775$ ).

In 2016, among all girls who were enrolled in secondary education, 29.09% in urban areas and 8.64% in rural areas completed secondary education. An independent-sample t-test was conducted to compare the secondary school completion rate in urban

and rural areas. For this test, equal variances were not assumed. There was a significant difference in the percentages for secondary school completion rate for girls in urban areas ( $M= 29.09$   $SD=0.45421$ ) and rural areas ( $m= 0.0864$ ,  $SD=0.28102$ ). Thus, even though the percentage of secondary school completion rate declined for girls from 2000 to 2016, more women (a notable percentage) in urban areas completed secondary school in comparison to rural areas.

In 2000, the percentage of boys who completed secondary school education was 50.18% in urban areas and 17.78% in rural areas. An independent-sample t-test was conducted to compare the secondary school completion rate in urban and rural areas. For this test, equal variances were not assumed. The results were highly significant for boys who completed primary school in urban areas ( $m=0.5018$  and  $SD=0.50004$ ) and rural areas ( $0.1778$  and  $SD=0.38238$ ).

In 2016, the percentage of boys who completed secondary was 30.12% in urban areas and 12.34% in rural areas. An independent-sample t-test was conducted to compare the secondary school completion rate in urban and rural areas. For this test, equal variances were not assumed. The results were highly significant for boys who completed secondary in urban areas ( $m=0.3012$  and  $SD=0.45884$ ) and rural areas ( $m=0.1234$  and  $SD=0.32888$ ).

### Summary of Results

From the data presented above, more boys compared to girls completed secondary education in 2000 and 2016. Also, when comparing urban versus rural areas, more



students residing in urban areas completed their secondary education compared to students residing in rural areas. Table 3 summarizes these data.

Table 3. Summary of Secondary School Education

	Urban	Rural
2000 (girls)	45.67	9.11
2000 (boys)	50.18	17.78
2016 (girls)	29.09	8.64
2016 (boys)	30.12	12.34

Source: thesis author

When assessing these trends in light of gender and location, noteworthy results emerge. In both urban and rural areas, more boys in comparison to girls completed secondary education in 2000 and 2016. However, the difference is much wider in rural areas than it is in urban areas. It is also important to note that the results of the rural areas are a better indication of where Ethiopia is because most of the population is located in the rural regions.

In 2000, the percentage of women who completed higher education was 0.47% and the percentage of men who completed higher education was 1.92%. A paired sample test was conducted to compare the means of the two groups. The results show that there was a high significance of the means for higher education completion rate for women ( $m=0.0047$ ,  $SD=0.06810$ ) and for men ( $m=0.0192$ ,  $SD=0.13717$ ). In 2016, the percentage of women who completed higher education was 2.19% and the percentage of men who completed higher education was 5.9%.

Likewise, a paired sample test was conducted to compare percentages. The results show that the percentages for women ( $m=0.0219$   $SD=0.14635$ ) and men ( $m=0.0589$ ,  $SD=0.23541$ ) were highly significant. The results show that higher education completion rate has increased for both men and women. However, significantly more men completed higher education when compared to women in 2016.

When assessing the differences based on location (urban versus rural), the results show important trends. In 2000 the percentage of women who completed higher education in urban areas was 2.36% and in rural areas it was 0.07%. An independent T-test was conducted to compare the higher education completion rate in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the higher education completion rate in urban areas ( $m=0.0236$ ,  $SD=0.15185$ ) and rural areas ( $m=0.0007$ ,  $SD=0.02675$ ). Thus, more women in urban areas were completing higher education in comparison to rural areas. In 2016, 10.47% of women living in urban areas and 0.37% of women living in rural areas completed higher education. Likewise, an independent T-test was conducted to compare the higher education completion rate in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the higher education completion rate in urban areas ( $m=0.1047$ ,  $SD=0.30625$ ) and rural areas ( $m=0.0037$ ,  $SD=0.06053$ ).

With regard to men, 9.2% in urban areas and 0.36% in rural areas completed higher education. An independent T-test was conducted to compare the higher education completion rate in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the higher education completion rate in urban areas ( $m=9.2\%$ ,  $SD=0.28903$ ) and rural areas ( $m=0.36\%$ ,  $SD=0.06023$ ). In 2016, 22.94% of

men in urban areas and 2.54% in rural areas completed higher education. Likewise, an independent T-test was conducted to compare the higher education completion rate in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the higher education completion rate in urban areas ( $m=0.2294$ ,  $SD=0.42050$ ) and rural areas ( $m=0.0254$ ,  $SD=0.15721$ ).

Table 4. Summary of Trends in Higher Education

	Urban	Rural
2000 (girls)	2.36	0.07
2000 (boys)	9.20	0.36
2016 (girls)	10.47	0.37
2016 (boys)	22.94	2.54

Source: thesis author

Overall, the MDGs have had some success in helping to increase higher education in both urban and rural areas, although the percentage increase is considerably higher in urban areas than in rural areas. Moreover, the percentage increase is significantly higher for men than for women in both urban and rural areas. However, given that more men in both urban and rural areas (especially in rural areas) are completing higher education at disproportionately higher rates than women, interventions need to be made to balance this difference.

It should be noted that as the education level increases, the data show that education level declines for both men and women. However, the decline is much steeper

for women compared to men in both 2000 and 2016 in urban and rural areas (especially in rural areas).

### Early Child Marriage and Childbirth, 2000–2016

Early child marriage is one of the commonly cited reasons for why the number of female dropouts increases as education level increases. In 2016 women were asked, “Did you continue to attend school after your marriage?” Overall, 72.8% of women in Ethiopia stopped attending school after they got married. In urban areas, 60.8% of women said they stopped attending school after they got married and in rural areas it was 81.3%.

An independent T-test was used to compare the results in urban and rural areas. Given that equal variances are not assumed, there was a significant difference in the results in urban areas ( $m=0.39$ ,  $SD=0.488$ ) and rural areas ( $m=0.19$ ,  $SD=0.390$ ).

Early child marriage often has the effect of taking girls out of school. On average, children in Ethiopia start primary school at age 7 and complete primary school at age 14.<sup>66</sup> On average, secondary education starts at age 15 and ends at 18.<sup>67</sup> The legal age to marry in Ethiopia is 18, and anything under that is considered early child marriage. In order to understand the effects of early child marriage and birth on education, information on the age of girls who marry was divided into three segments for 2000 and 2016 (see Figure 1). The divisions are as follows:

- *The percentage of girls 14 and under who married and gave birth.* This segment is designed to test the effects of early child marriage and birth on primary school completion for girls.

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<sup>66</sup> “Education System in Ethiopia.” Belgium Grading System. Accessed 1 March 2019.

<sup>67</sup> “Education System in Ethiopia.”

- *The percentage of girls between the ages of 15 and 17 who married and gave birth.* This is designed to test the effects of early child marriage and birth on secondary school completion for girls.
- *The percentage of girls who got married at 18 or older.* This segment is used for comparison with the other two.

In 2000, the percentage of girls who got married at 14 or under was 33.6%; in 2016 it was 29.4%. The percentage of the girls who got married between 15 and 17 was 43.7% in 2000 and 38.9% in 2016. The percentage of women who got married at 18 or older in 2000 were 22.7% in 2000 and 31.7% in 2016 (see Figure 1).

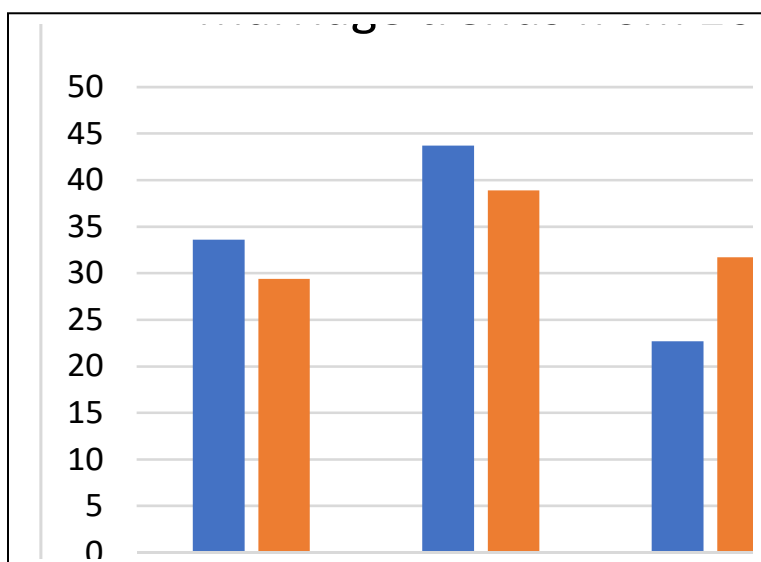


Figure 1. Marriage Trends, 2000-2016.

Source: thesis author

Regarding child birth, the percentage of girls who gave birth at 14 and under in 2000 was 9.3% and in 2016, it was 9.5%. The percentage of girls who gave birth between 15 and 17 in 2000 was 38.1%; and 2016 it was 37.6%. The percentage of girls who gave birth at 18 and older was 52.5% in 2000 and 52.9% in 2016 (see Figure 2). Even though,

there seems to be overall progress in reducing early child marriage and birth, the progress is slow (especially for early child birth).

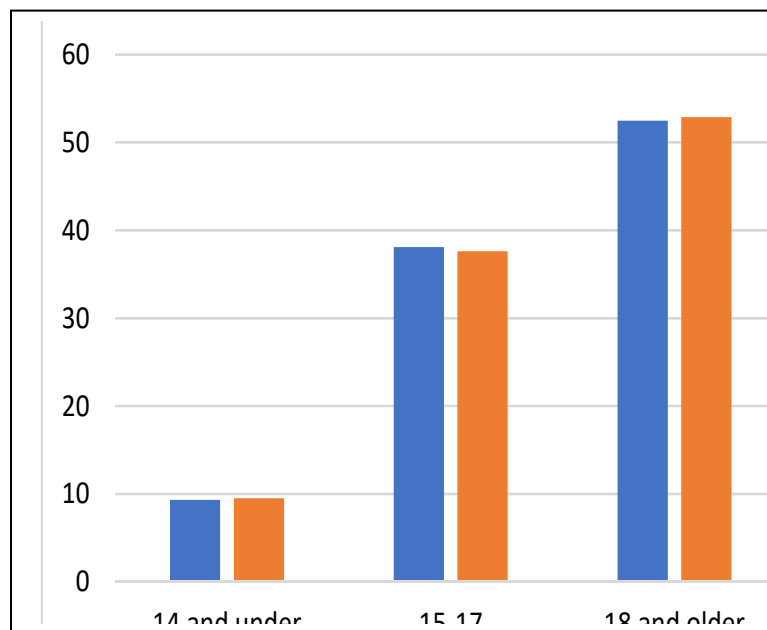


Figure 2. Early Childbirth Trends, 2000-2016.

Source: thesis author

### Early Child Marriage Trends by Location

In 2000, the percentage of girls who got married at age 14 and under in urban areas was 34% while in rural areas it was 33.5%. The percentage of girls who got married between the ages of 15 and 17 in 2000 in urban areas was 36.5%, and in rural areas it was 45.2%. The percentage of women who got married later than 18 years old was 29.5% in urban areas and 21.3% in rural areas. An independent-samples T-test was conducted to compare the early child marriage means in urban and rural areas. Given that equal variances are not assumed, there was a significant difference between early child

marriage in urban areas ( $m=1.9557$ ,  $SD=0.79553$ ) and rural areas ( $m=1.8776$ ,  $SD=0.73005$ ).

In 2016, the percentage of girls who got married at age 14 and under was 24.5% in urban areas and 30.5% in rural areas. The percentage of girls who got married between ages 15 to 17 was 33.9% in urban areas and 40% in rural areas. The percentage of women who married later than 18 while living in urban areas was 41.6% in urban areas and 29.5% in rural areas (see Table 5). An independent-samples T-test was conducted to compare the early child marriage means in urban and rural areas. Given that equal variances are not assumed, there was a significant difference between early child marriage in urban areas ( $m=2.1711$ ,  $SD=0.79474$ ) and rural areas ( $m=1.9897$ ,  $SD=0.77438$ ).

Table 5. Early Marriage Trends, by location.

	2000 Urban	2000 Rural	2016 Urban	2016 Rural
Age 14 and under	34	33.5	24.5	30.5
Ages 15-17	36.5	45.2	33.9	40
Age 18 and older	29.5	21.3	41.6	29.5

Source: thesis author

The previous section showed that 60.8% of women living in urban areas and 81.3% of women in rural areas stopped attending school after they got married. It also showed that as the education level rises, the percentage of female dropouts increases as well. For example, in comparison to primary school completion, secondary school

completion was much less for girls when compared to boys. Moreover, the decline was even steeper for girls in rural areas when compared to urban.

The data presented in this section shows that the percentage of girls who married at 14 and under, and those who married between the ages of 15 and 17, has decreased for both urban and rural areas during the time period 2000 to 2016. Moreover, the percentage of girls who got married between ages 15 to 17 was higher than the percentage of girls who got married at 14 and under in both urban and rural areas for 2000 and 2016. The percentage of girls who got married between ages 15 to 17 is much higher in rural areas than urban for 2000 and 2016. However, an interesting trend is the decline of the percentage of girls who married between ages 15 to 17 from 2000-2016: it is higher in rural areas than it is in urban areas. In urban areas the percentage declined by 2.6% whereas in rural areas it declined by 5.2%. This data helps explain the role early child marriage can have in hindering women from pursuing secondary and higher education.

Moreover, an inevitable effect of early child marriages is birth. If young brides give birth soon after that they get married, their chances for pursuing higher levels of education gets even narrower. Thus, we will explore the trends of early child birth from 2000-2016.

#### Early Childbirth Trends by Location

In 2000, the percentage of girls 14 and under who gave birth while living in urban areas was 11.3% and in rural areas 8.9%. The percentage of girls who gave birth between ages 15 and 17 was 35.9% in urban areas and 38.6% in rural areas. Lastly, the percentage of women 18 and older who gave birth was 52.8% in urban areas and 52.5% in rural



areas. An independent-samples T-test was conducted to compare the early childbirth means in urban and rural areas. Given that equal variances are not assumed, there was a not significant difference between early childbirth in urban areas ( $m=2.4145$ ,  $SD=0.68519$ ) and rural areas ( $m=2.4358$ ,  $SD=0.65109$ ).

In 2016, the percentage of girls 14 and under who gave birth was 10.3% in urban areas and 9.3% in rural areas. The percentage of girls who gave birth between the ages of 15 and 17 was 30.4% in urban areas and 39.2% in rural areas. The percentage of girls age 18 and older who gave birth was 59.3% in urban areas and 51.5% in rural areas. An independent-samples T-test was conducted to compare the early childbirth means in urban and rural areas. Given that equal variances are not assumed, there was a significant difference between early childbirth in urban areas ( $m=2.4902$ ,  $SD=0.67475$ ) and rural areas ( $m=2.4219$ ,  $SD=0.65592$ ). Table 6 summarizes these data.

Table 6. Early Childbirth, by Location.

	2000 Urban	2000 Rural	2016 Urban	2016 Rural
Age 14 and under	11.3	8.9	10.3	9.3
Ages 15-17	35.9	38.6	30.4	39.2
Age 18 and older	52.8	52.5	59.3	51.5

Source: thesis author

### Summary of Data

Regarding early child birth during the time period 2000 to 2016, we see different and interesting trends in both urban and rural areas. In urban areas, the percentage of girls

who gave birth at 14 and under decreased from 11.3% in 2000 to 10.3% in 2016; in rural areas, the percentage increased from 8.9% in 2000 to 9.3% in 2016.

A similar trend can be observed for girls between 15 and 17. In urban areas, the percentage of girls between 15 and 17 who gave birth decreased from 35.9% in 2000 to 30.4% in urban areas and it increased from 38.6% to 39.2% in rural areas.

Child marriage and birth not only take a toll on female education but also make young girls susceptible to a range of diseases and various health complications which have the capacity to hinder a women's economic and social empowerment as well as life expectancy. In the next section, I explore the effects of early child marriage and birth on female health.

#### Female Health, 2000-2016

According to WHO, “the morbidity rate in [African] women is 76% while the morbidity rate in men is 23%.”<sup>68</sup> Pregnancy issues, maternal mortality, complications arising from FGM—all have cut short the lives of many Ethiopian women across the board. This section assesses the role of cultural norms and practices in regenerating this trend.

According to a study by Bogalech Alemu on early child marriage in Ethiopia, “more than 80% of respondents could cite no reason other than it being a tradition they had to adhere to.”<sup>69</sup> He also noted other reasons for continuing the practice of child marriage: “To strengthen relationships, for prestige, difficult to get married if older, the

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<sup>68</sup> World Health Organization (WHO), “Global Health Observatory Data Repository (African Region),” 2016. Available from: <https://apps.who.int/gho/data/node.main-afro>. Accessed 2 June 2020.

<sup>69</sup> Bogalech Alemu, “Early Marriage in Ethiopia: Causes and Health Consequences.” Available from: <http://www.bibalex.org/Search4Dev/files/289967/120687.pdf>. Accessed March 1, 2019.

family will be victim of gossip, to earn dowry, to protect virginity and to avoid premarital affairs.”<sup>70</sup> But the health impacts on young brides are numerous: HIV/STDs, unprotected sex, fistula, high mortality rates, and domestic violence. Each of these is discussed below.

### HIV/STDs and Unprotected Sex

Young child brides are most often likely to face HIV and STDs. Many girls marry men who are much older, who have had multiple sexual partners. The Child Marriage Briefing found: “The younger a bride is, the greater the age difference between her and her spouse. In Ethiopia, the mean age difference between spouses is 10.1 years if the wife marries before age 15 compared to 8.6 years if the wife marries at or after age 20.”<sup>71</sup>

UNICEF found:

Child brides are also significantly more likely to be exposed to sexually transmitted diseases, including HIV. This is because not only are they vastly more likely than their male peers to be married, but they are most often married to older men with whom they are more likely than their unmarried counterparts to have unprotected sex. The end result is that married girls—compared to their unmarried but sexually active peers—are 50% more likely to have a sexually transmitted disease.<sup>72</sup>

Given the age difference, young brides have a higher chance of being manipulated and have less power to refuse to engage in unprotected sex.

Given the risk of contracting HIV and other STDs, the safest form of contraception is condoms. Women were asked if they could ask their partners to use a condom. In Ethiopia generally in 2016, 31.3% said yes, 62.4% said no, and 6.4% said did

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<sup>70</sup> Alemu, “Early Marriage in Ethiopia.”

<sup>71</sup> Population Council, “Child Marriage Briefing.” Available from: <https://www.popcouncil.org/uploads/pdfs/briefingsheets/ETHIOPIA.pdf>. Accessed 1 March 2019.

<sup>72</sup> UNICEF. Available from: [https://www.unicef.org/ethiopia/Evidence\\_Review.pdf](https://www.unicef.org/ethiopia/Evidence_Review.pdf). Accessed 2 June 2020.

not know (DNK)/not sure/depends. In the urban areas, 37.4% said no, 57.2% said yes, and 5.4% said DNK/not sure/ depends. In rural areas, 69.7% said no, 23.7% said yes, and 6.6% said DNK/not sure/depends. An independent T-test was conducted to compare the means in urban and rural areas. Given that equal variances were assumed, there was a significant difference in the results for urban areas ( $m= 1.00$   $SD= 1.736$ ) and rural areas ( $m=0.77$ ,  $SD= 1.973$ ). Table 7 summarizes the data.

Table 7. HIV/STDs and Unprotected Sex

	Yes	No	Did not know/depends/not sure
Urban	57.2	37.4	5.4
Rural	23.7	69.7	6.6

Source: thesis author

From the data above, one obvious trend is that women residing in urban areas have more power to ask their partner to use a condom. To test whether or not younger brides have less power to request protected sex, the question was put to three different age groups: 14 and under, 15 to 17, and 18 and older. Among girls who get married at age 14 and under, 68.6% said no, 25.1% said yes and 6.4% DNK/not sure/depends. For girls who married between the ages of 15 to 17, 64.9% said no, 28.3% said yes, and 6.8% said DNK/not sure/depends. For girls who married at 18 or older, 55.8% said no, 38.3% said yes, and 5.9% said DNK/not sure/depends. An independent T-test was conducted to compare the means in urban and rural areas. Given that equal variances were assumed,

there was a significant difference in the results for urban areas ( $m= 2.4322$   $SD=0.72904$ ) and rural areas ( $m=2.0409$ ,  $SD= 0.76939$ ). Table 8 below summarizes the results.

Table 8. Wife Feels Empowered to Request Protected Sex

	No	Yes	Don't know/It depends/Not sure
Age 14 and under	68.6	25.1	6.4
Ages 15 to 17	64.9	28.3	6.8
Age 18 and older	55.8	38.3	5.9

Source: thesis author

An obvious trend is that a significant proportion of young brides cannot ask their partners to use a condom. The younger the age group, the less they are able to ask this question, and vice versa. For example, 68.6% of girls who married at the age of 14 and under said they could not ask; 64.9% of girls who married between the ages of 15 and 17 said they could not, and 55.8% of women who married at the age of 18 and older said they could not. The older the age group, the more the girls were able to ask their partner to use a condom, while the younger the age group, the less power the girls felt.

Stated in the opposite, 25.1% of girls who married at 14 or younger said yes they could ask their partners to use a condom, 28.3% of women who married between the ages of 15 and 17 said yes, and 38.3% of women that got married at 18 and older said yes. Thus, the age when a girl gets married does determine the extent to which she is allowed to practice safe sex. Hence it also can be argued that the power to request protected sex also determines the extent to which a girl is likely to contract HIV and other STDs.

## Fistula

Another health ailment that arises due to early child marriage and childbirth is fistula. In Ethiopia, the most common type of fistula is obstetric fistula, which is defined as:

Obstetric fistula is a child birth injury usually caused by unrelieved, prolonged obstructed labor. Obstructed labor can develop during the second stage of labor, when the fetus cannot fit through the birth canal because the pelvis is too small, the baby is too big, or if there is a mal presentation. If the woman in labor does not die, the pressure of the baby's head on the mother's pelvis leads to the death of tissue in the birth canal which creates a hole called an obstetric fistula.<sup>73</sup>

Obstetric fistula is widespread in areas

where the social culture encourages marriage at a young age of ten shortly after a girl's first menstrual period between the ages of 9 and 15. In many of these cases, the first pregnancy follows soon after marriage. . . .

Women whose first marriage was at an age ranging between 15–19 years were 87.4% less likely to suffer obstetric fistula than women whose first marriage was at an age ranging <15 years. In the same way, women whose first marriage was at an age ranging between 20–24 years were 81.7% less likely to suffer obstetric fistula than women whose first marriage was at an age <15 years controlling for other variables in the model.<sup>74</sup>

## Maternal Mortality

Death is another complication that arises from early child marriage and birth.

Ethiopia ranks near the top among countries that have a high maternal mortality ratio, with a rate of 676 per 100,000 live births.<sup>75</sup> According to Berhan and Berhan,

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<sup>73</sup> Asrat Atsedeweyn Andargie, and Abebe Debu, "Determinants of Obstetric Fistula in Ethiopia," *African Health Sciences* 17, no. 3 (2017): 671.

<sup>74</sup> Andargie and Debu, "Determinants of Obstetric Fistula."

<sup>75</sup> World Health Organization, "Gender and Women's Health." Available from: [http://www.who.int/profiles\\_information/index.php/Ethiopia:Analytical\\_summary\\_-\\_Gender\\_and\\_women's\\_health..](http://www.who.int/profiles_information/index.php/Ethiopia:Analytical_summary_-_Gender_and_women's_health..) Accessed 1 March 2019.

Ethiopia is one of six countries that have contributed to more than 50% of all maternal deaths across the world. . . . In the last decade, however, the top four causes of maternal mortality were obstructed labor/uterine rupture (36%), hemorrhage (22%), hypertensive disorders of pregnancy (19%) and sepsis/infection (13%).<sup>76</sup>

The major cause of maternal mortality is obstructed labor/uterine rupture, and one its causes is early child birth among young girls.

Even though women in different age groups are affected by maternal mortality, girls who marry and give birth early have a significantly higher risk of being affected.

According to a study by the organization Girls Not Brides:

Girls who give birth before the age of 15 are five times more likely to die in childbirth than girls in their 20s. Where girls survive childbirth, they are at increased risk of pregnancy-related complications. For example, 65% of all cases of obstetric fistula occur in girls under the age of 18.<sup>77</sup>

#### Domestic Violence, 2000-2016

Although the right of a women to not have bodily violence inflicted upon her is an inviolable human right and an important precursor for helping women achieve empowerment, that right has not been included as part of the MDGs. However, it is very important, so it is another focal point of this study.

According to a 2012 study of violence against women, “Intimate partner violence against women is more prevalent in Ethiopia and is among the highest in the

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<sup>76</sup> Berhan, Y., and A. Berhan. “Review of Maternal Mortality in Ethiopia: A Story of the Past 30 Years.” *Ethiopian Journal of Health Sciences* 24, no. 10 (2014): 3.

<sup>77</sup> Girls Not Brides website. Available from: <https://www.girlsnotbrides.org/about-girls-not-brides/>. Accessed 2 June 2020.

world.”<sup>78</sup> Another study in 2015 said: “Violence against women is now widely recognized as a serious human right abuse, and an important public health problem with substantial consequences physical, mental, sexual, and reproductive health.”<sup>79</sup> A study by Yigzaw et al., identified instances of domestic violence:

The following acts were mentioned as instances of intimate partner violence: beating with/without an object, use of weapons, burning, forced sex, unusual sex, insults, undermining, not listening to, calling names, intimidation, withholding money, extramarital affairs, annexing/selling/destroying properties of a partner, monitoring movements, preventing from learning/working, infecting one’s spouse with HIV deliberately, forcing a woman to become pregnant or to have too many children, abandoning a woman, and denying equal rights on resources and decision-making. While acknowledging men as well as women could be violent, all believed men were the offenders in most cases, and women assaulted in reciprocity. As a result, most saw spousal violence as an expression of male dominance.<sup>80</sup> . . .

A woman said: “It is difficult to suppose an Ethiopian man would not raise his foot when he is angry with his wife. . . .

Potentially serious assaults were said to follow after suspicion of infidelity and jealousy. Stories of violent acts ranging from (intentional) severe burn injuries to murdering a partner by jealous husbands and wives were narrated. In the in-depth interviews, survivors of violence said they were slapped, punched, kicked and beaten with an object. One of the victims said her husband had broken her teeth with a stone. A perpetrator of violence said at one time he had to take his wife to hospital due to the beating that caused her difficulty to eat.<sup>81</sup>

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<sup>78</sup> Sileshi Garoma Abeya, Mesganaw Fantahun Afework, and Alemayeh Worku Yalew, “Intimate Partner Violence against Women in West Ethiopia: A Qualitative Study on Attitudes, Woman’s Response, and Suggested Measures as Perceived by Community Members,” *Reproductive Health* 9, no. 1 (2012): 9-14.

<sup>79</sup> Agumasie Semahegn, and Bezatu Mengistie, “Domestic Violence Against Women and Associated Factors in Ethiopia: Systematic Review,” *Reproductive Health* 12, no. 1 (2015).

<sup>80</sup> Tegbar Yigzaw, Yemane Berhane, Nigussie Deyessa, Mirgissa Kaba, “Perceptions and attitudes towards violence against women by their spouses: A qualitative study in Northwest Ethiopia,” *Ethiopian Journal of Health Development*, no. 1 (2010): 39-45. Available from: <https://www.ajol.info/index.php/ejhd/article/viewFile/62943/50840>. Accessed 2 June 2020.

<sup>81</sup> Yigzaw, et al., “Perceptions and attitudes towards violence.”



In the following sections, I examine if wife beating trends for commonly cited reasons has gone down, up, or remained the same during the time period 2000 to 2016.

Commonly cited reasons why a husband beats his wife are:

- She argues with him
- She burns the food
- She goes out of the house without telling him
- She neglects the children
- She refuses to have sex with him.

#### Beating Justified if Wife Argues with Husband

In 2000, 60% of women agreed that wife beating was justified if the wife argues with her husband. But by 2016, that percentage had dropped to 44.3%. In 2000, 45% of women in urban areas and 74% of women in rural areas said that wife beating was justified if the wife argued with her husband. An independent-samples t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significance difference in the results in urban areas ( $m=0.45$ ,  $SD=0.931$ ) and rural areas ( $m=0.74$ ,  $SD=0.909$ ).

In 2016, 23% of women in urban areas said this type of beating was justified, while in rural areas 52% said it was justified. An independent-samples t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the results in urban areas ( $m=0.23$ ,  $SD=0.554$ ) and rural areas ( $m=0.52$ ,  $SD=0.629$ ).

### Beating Justified if Wife Burns the Food

In 2000, 57.3% of women said that wife beating was justified if she burned the food, but by 2016 it had declined to 44.9%. In 2000, 45% of women in urban areas said beating was justified if the wife burns the food; in rural areas it was 72%. An independent-samples t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the results in urban areas ( $m=0.45$ ,  $SD=0.904$ ) and rural areas ( $m=0.72$ ,  $SD=0.725$ ).

In 2016, 19% of women living in urban areas said that wife beating was justified if she burns the food, whereas in rural areas it was 48%. An independent-samples t-test was conducted to compare the results in urban and rural areas. There was a significant difference in the results in urban areas ( $m=0.19$ ,  $SD=0.492$ ) and rural areas ( $m=0.48$ ,  $SD=0.608$ ).

### Beating Justified if Wife Goes Out of the House Without Telling Him

In 2000, 57.3% of women said that wife beating was justified if the wife went out of the house without telling her husband, but by 2016 the percentage had dropped to 44.9%. In 2000, the percentage in urban areas was 41%; and 68% in rural areas. An independent-sample t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the results in urban areas ( $M=0.41$   $SD=0.740$ ) and rural areas ( $m=0.68$ ,  $SD=0.821$ ).

In 2016, the percentage was 28% in urban areas and 53% in rural areas. An independent-sample t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the results in urban areas ( $M=0.28$   $SD=0.614$ ) and rural areas ( $m=0.53$ ,  $SD=0.719$ ).

### Beating Justified if She Neglects the Children

In 2000, 64.34% of women said that wife beating was justified if the wife neglects her children, whereas the percentage dropped to 48.1% in 2016. In 2000, the percentage was 53% in urban areas and 74% in rural areas. An independent-samples t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the results in urban areas ( $M=0.53$ ,  $SD=0.680$ ) and rural areas ( $m=0.74$ ,  $SD=0.811$ ).

In 2016, the percentage was 29% in urban areas and 56% in rural. An independent-samples t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the results in urban areas ( $M=0.29$ ,  $SD=0.542$ ) and rural areas ( $m=0.56$ ,  $SD=0.688$ ).

### Beating Justified if She Refuses to Have Sex

In 2000, 52.44% of women said that wife beating was justified if a wife refused to have sex with her husband, but by 2016 that percentage was 40.5%. In 2000 the percentage was 66% in urban areas and 76% in rural areas. An independent-samples t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significant difference in the results in urban areas ( $M=0.66$ ,  $SD=1.695$ ) and rural areas ( $M=0.76$ ,  $SD=1.212$ ).

In 2016, the percentage was 23% in urban areas and 52% in rural areas. An independent-samples t-test was conducted to compare the results in urban and rural areas. Given that equal variances were not assumed, there was a significance difference in the results in urban areas ( $M=0.23$ ,  $SD=0.634$ ) and rural areas ( $M=0.52$ ,  $SD=0.851$ ).

## Summary of Overall Trends

It is clear from Table 9 below that domestic violence continues to occur for the commonly cited reasons given in the table. The trend remains much higher in rural regions in 2016 than in urban areas. For example, in 2016, the justification to beat a wife if she neglects the children was 28% in urban regions and 53% in rural areas. Rural regions seem to be more adamant about wife beating compared to urban areas. It also can be observed that rural areas have not been as willing to reduce these trends as seems to be occurring in urban areas.

The data show the extent to which women are forcibly made to adhere to their culturally prescribed roles. The use of force is more rampant in rural areas and the decline of use of force is much slower. Rural regions—which represent most of Ethiopia—are more inclined to adhere to cultural roles and practices.

Table 9. Summary of Domestic Violence Trends, 2000-2016.

Reasons for Domestic Violence	2000	2000	2016	2016
	Urban	Rural	Urban	Rural
Wife beating justified if she argues with husband	45	74	23	52
Beating justified if she burns the food	45	72	19	48
Beating justified if she goes out of the house without telling husband	41	68	28	53
Beating justified if she neglects the children	53	74	29	56
Beating justified if she refuses to have sex with her husband	66	76	23	52

Source: thesis author

## Employment, 2000-2016

MDG Goal number 3 seeks to “promote gender equality and empower women.”

One obvious measure of economic empowerment is employment and income. In this section, I examine female employment and income relative to men.

### Employment Trends

In 2000, 74.5% of people in the Ethiopia were employed. When considered by location, 74% of people were employed in urban areas and 74.8% were employed in rural areas. When looked at by gender, 56.8% of women were employed, and 93% of men were employed in 2000. A paired sample test was conducted to compare the means of both genders. There was a significant difference in the means for men ( $M=5.12$ ,  $SD=4.234$ ) and women ( $M=3.14$ ,  $SD=3.148$ ).

In 2016, 66.4% of people in Ethiopia were employed. When assessing by location, 70% were employed in urban areas and 65.7% were employed in rural areas. Considered by gender, 47.3% of women were employed in 2016 and 87% of men were employed. A paired sample test was conducted to compare the means of both genders. There was a significant difference in the means for men ( $M=8.82$   $SD=19.869$ ) as compared to women ( $M=3.47$ ,  $SD=11.740$ ).

It is important to keep in mind that the number of respondents in 2016 was approximately half of the number of respondents in 2000. In general, the data shows that overall employment rate and overall employment rate by location and gender has gone down from 2000 to 2016. Table 10 below summarize the results.

Table 10. Summary of Employment, 2000-2016.

	2000	2016
Overall employment in Ethiopia	74.5%	66.4%
Urban and rural employment:		
Urban	74%	70%
Rural	74.8%	65.7%
Female employment	56.8%	47.3%
Male employment	93%	87%

Source: thesis author

The table shows that the national employment rate declined by 8.1% from 2000 to 2016. Moreover, the decline in rural areas is larger than the decline in urban areas. There, employment declined by 4% whereas in rural areas, it was 9.1%.

Even though, the national employment rate as well as the employment rate for both genders declined from 2000 to 2016, one steady trend is the employment rate for men, which has always been much higher than the employment rate for women. For example, the percentage of employed males in 2000 was 93% whereas it was 56.8% for female. In 2016 the percentage of employed males was 87% and the percentage of employed females was 47.3%.

It is important to note that the disparity between male and female employment has grown wider. In 2000, the difference was 36.2%, but in 2016 it was 39.2%. Thus, if we consider overall employment trends, it can be concluded that the MDGs have been ineffective in improving the economic empowerment of women. By analyzing the data in greater detail, I can provide more definitive results.

### Employment Trends by Location and Gender

When delving farther into employment trends in gender and location, important indicators emerge. In 2000, 58% of women living in urban areas were employed; 56% of women in rural areas were employed. An independent-sample t-test was conducted to compare the urban and rural differences. There was a significant difference in urban areas ( $M=4.31$ ,  $SD=13.089$ ) and rural areas ( $M=3.29$ ,  $SD=7.884$ ). For men, 93.2% in urban areas were employed, and 93.9% in rural areas were employed. An independent-sample t-test was conducted to compare urban and rural differences. There was a significant difference in urban areas ( $M=8.47$ ,  $SD=18.554$ ) and rural areas ( $M=6.47$ ,  $SD=12.702$ )

In 2016, 55.6% of women in urban areas and 45.4% of women in rural areas were employed. An independent-sample t-test was conducted to compare the urban and rural differences. There was a significant difference in urban areas ( $M=5.59$ ,  $SD=17.791$ ) and rural areas ( $M=3.43$ ,  $SD=11.045$ ). For men, 88% in urban areas and 87.9% in rural areas were employed. An independent-sample t-test was conducted to compare the urban and rural differences. There was a significance difference in urban areas ( $M=12.64$ ,  $SD=26.561$ ) and rural areas ( $M=8.07$ ,  $SD=18.174$ ). Table 11 summarizes this data.

Table 11. Employment Trends by Location and Gender.

2000/2016	Urban	Rural
2000 (men)	93.2	94.0
2000 (women)	58.1	56.5
2016 (men)	88.3	87.8
2016 (women)	55.6	45.5

Source: thesis author

Overall, employment has declined for men and women in both urban and rural areas during the period 2000 to 2016. However, as the table above shows, the percentage of men employed has always been much higher than the percentage of women employed. Moreover, in both 2000 and 2016, more women in urban areas were employed compared women in rural areas.

In urban areas, the percentage difference between the employed men and women from 2000-2016 declined by 2.4% but in rural areas it increased by 5%. Table 12 below shows the difference between employment for men and women in urban and rural areas in 2000 and 2016.

Table 12. Men vs. Women Employment, 2000-2016.

	Urban	Rural
2000	35.1	37.5
2016	32.7	42.5

Source: thesis author

Therefore on the subject of fostering gender equality and empowerment of women in employment, I argue that the success of the MDGs is mixed. The data shows that the MDGs had no success in fostering economic empowerment for women in Ethiopia. In fact, it appears the situation got worse instead of better. However, a more detailed assessment of the data shows that the MDGs had some success in the realm of employed men and women, where the percentage went down by 2.4% from 2000 to 2016. Even though this success is small, it should still be noted.



### Payment for Work Done

Even though the data shows that 56.8% of women in 2000 and 47.3% of women in 2016 were employed in Ethiopia, it is important to note that not all of the women were being paid. In fact, 40.5% of women employed in 2000, and 45.8% of women employed in 2016 were not paid for their work. And the remainder were paid in cash, in kind, or both. In 2000, 17.1% of women in urban areas, and 45.9% of women in rural areas were not paid for their work. An independent-samples t-test was conducted to compare the urban and rural areas. Given that equal variances are not assumed, there was a significance in the means of urban areas ( $M=0.91$ ,  $SD=0.526$ ) and rural areas ( $M=1.04$ ,  $SD=1.172$ ).

In 2016, 21.6% of women living in urban areas and 52.6% of women living in rural areas were not getting paid for their work. An independent-samples t-test was conducted to compare the means in urban and rural areas. Given that equal variances are not assumed, there was a significance in the means of urban areas ( $M=0.86$ ,  $SD=0.534$ ) and rural areas ( $M=0.78$ ,  $SD=1.005$ ). Table 13 below summarizes the data, showing the percentage of Ethiopian woman who were employed but not paid in both urban and rural areas.

Table 13. Percentage of Women Employed But Not Paid, Urban vs. Rural.

	Urban	Rural
2000	17.1%	45.9%
2016	21.60%	52.60%

Source: thesis author

This data analysis highlights several interesting points regarding the state of women empowerment in Ethiopia. I examined important variables including education, early child marriage and birth, female health, domestic violence, and employment. In the next section, I will assess the role of cultural frameworks and practices in prolonging these trends.

## Chapter VI

### Discussion

An inevitable truth is that rural regions compared to urban regions are more attuned to cultural beliefs and practices. In many of the variables assessed in Chapter V, it was observed that the rural regions were more adamant about adhering to cultural beliefs and practices despite some overall progress.

#### Education

In the Education variable, I observed that the level of education enrollment and completion for women, as compared to men, gets smaller and smaller. Even though this trend holds true for both urban and rural regions, the decline is much steeper in rural regions. When looking at the urban versus rural education, there are generally more educated people in urban areas (even though not extremely significant) in comparison to rural regions. However, in both urban and rural areas, women are the less educated compared to men.

When assessing education enrollment and completion in rural regions and some urban regions, one factor that comes into play is distance. According to the Education Sector Development Program V (ESDP V):

The fact that a large majority of the Ethiopian population lives in rural areas and in fairly dispersed communities poses specific problems for the education sector: spreading education and ensuring equitable access to education presents specific challenges in such a geographic context. In addition, the existence of many pastoral and semi-pastoralist groups raises

issues of organization of the school system and also of the relevance of the curriculum.<sup>82</sup>

Ethiopians living in rural regions will obviously be more affected by distance than their urban counterparts because fewer schools will be available, and even if they are available, most people do not live nearby them. As a result, many parents who have daughters are reluctant to send them some distance to school.

However, the Ethiopian government has implemented a strategy to tackle this problem, and to a certain degree it has been a success, according to ESDP V:

Considerable progress has been made through school construction by reducing the distance between schools and pupils' homes. . . . As a result of concerted efforts since 1996, the number of primary schools (including ABE) has risen from 11,000 to 32,048 and student enrollment at this level has grown from less than 3 million to over 18 million within the same time frame.<sup>83</sup>

The data does indeed support this statement. As stated earlier, primary school enrollment from 2000 to 2016 increased in both urban and rural areas. However, in the rural areas, even though enrollment for girls increased, it is still less than boys. On average it has been the same for girls and boys across urban regions from 2000 to 2016. Nonetheless, completion rate is lower for girls than for boys in both urban and rural areas. Thus it is clear that this factor plays a role in deterring female education, in addition to access.

Given that Ethiopia is a poor country, one factor that can inevitably affect school completion is poverty. People who are struggling to survive may not have the means to send their children to school. However, it is also true that primary education is free in

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<sup>82</sup> Education Sector Development Programme V (ESDP V), Federal Ministry of Education. Available from: <http://Users/baz192/Downloads/ESDP V FINAL.pdf>. Accessed 1 March 2019.

<sup>83</sup> "Education Sector Development Programme V."

Ethiopia.<sup>84</sup> This means that the cost of education should not be a burden that prevents girls from attending school.

### Early Child Marriage and Childbirth

When the effects of early child marriage are analyzed, I found that it has been a strong force in keeping girls out of school. The data analysis showed that in 2016, 60.8% of girls in urban areas who got married did not continue with school after they were married. Likewise, 81.3% of girls in rural areas who got married did not continue with school after they were married. For the girls, who stopped pursuing their education, a follow-up question was asked: “Why did you stop attending school after your marriage?” In urban areas, 8.2% said they graduated from school, 73.9% said they became too busy with life, 11.2% said their husbands did not want them to attend school, and 6.8% said there were other reasons. In rural areas, 1.2% said they had graduated from school, 65.7% said they were too busy with family life, 26.5% said their husbands did not want them attend, and 6.6% of women said there were other reasons.

Even though Ethiopia’s Third World status means there are other factors that can impact female education (i.e., costs, infrastructure, etc.), the evidence clearly shows that the main factor hindering female higher education is early child marriage. Traditional established roles for girls thwarted enrollment and completion of higher education for girls more than any other factor. Given the developmental hindrances in rural regions, the impact was inevitably stronger in rural areas compared to urban areas.

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<sup>84</sup> “Education System in Ethiopia.”

Poor infrastructure meant that securing daily needs for survival (e.g., fetching water, finding and carrying wood for cooking, working in the fields) is cumbersome in rural regions – and this burden fell disproportionately on young girls and women. Therefore, in order to survive, the education of young girls and teenagers is affected.

Moreover, as the young girls marry and have children, the pressure to survive and endure through the day while meeting all the family's needs becomes intense, thus making it virtually impossible for girls to pursue their education. It is clear that early child marriage, more than any other variable, caused a significant decline in female education.

In general, the data showed that there has improvement regarding the reduction in numbers of child marriages and childbirths during the period 2000 to 2016. However, progress is slow, and the negative numbers remain significant enough to affect female education. In 2016, (the most recent data on Ethiopia), girls between 15 and 18, comprise 57.4% of urban women who are cohabitating, and 29.8% of urban women who are giving birth. This is also the ideal time frame in which young girls are supposed to start and complete high school. Despite aggressive government laws and policies that foster affirmative action for women and promote gender equality, women still lag behind men on the education ladder. The reason why women lag behind men is not an access issue; the data showed that among women and men located in the same region, men have a higher enrollment and completion rate. Thus, simply making education more accessible to women does not guarantee that more women will pursue higher levels of education. It is cultural obstacles that need to be handled effectively.

## Female Health

Before continuing, one clarification should be made. In Ethiopia, the word *marriage* cannot be used because the government recognizes a formal marriage as a union that can only occur between a man and women 18 years and older. Therefore, in 2016, 37.1% of girls 15 and under living in urban areas, and 48.1% of girls living in rural areas were cohabiting with a man.

On the topic of women's health, I have discussed certain health problems like fistula, maternal mortality, and HIV/STDs. These problems are not going to vanish simply because of medical intervention. Instead, the root causes must be addressed. The data analysis in the previous chapter highlighted the role of cultural practices in making young girls susceptible to these problems.

### Fistula

In Ethiopia, obstetric fistula is one health issue that occurs in early child marriage and childbirth. According to Andarge and Debu, obstetric fistula is widespread in areas “where the social culture encourages marriage at a young age of ten shortly after a girl's first menstrual period between the ages of 9 to 15. In many of these cases the first pregnancy follows soon after marriage.”<sup>85</sup>

In order to combat fistula and health implications that arise from early child marriage, it is important to assess the cultural implications that continue to promote the practice. Regarding child marriage, “more than 80% of respondents could cite no reason

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<sup>85</sup> Asrat Atsedeweyn Andargie, and Abebe Debu, “Determinants of Obstetric Fistula in Ethiopia,” *African Health Sciences* 17, no. 3 (2017): 671.

other than it is a tradition they had to adhere to.”<sup>86</sup> Other reasons for upholding the child marriage practice is “to strengthen relationships, for prestige, it is difficult to get married if older, the family will be the victim of gossip, to earn dowry, to protect virginity, and to avoid premarital affairs.”<sup>87</sup> In 2016, 19.9% of girls 15 and under, living in urban areas, gave birth to their first child, and 20.8% of girls in rural areas of the same age group gave birth to their first child.

### Maternal Mortality

Besides fistula and other health complications, early child marriages lead to maternal mortality as well. According to the organization Girls Not Brides:

Girls who give birth before the age of 15 are five times more likely to die in childbirth than girls in their 20s. Where girls survive childbirth, they are at increased risk of pregnancy-related complications. For example, 65% of all cases of obstetric fistula occur in girls under the age of 18.<sup>88</sup>

Furthermore, in regions of Ethiopia where customary practices encourage girls to marry young, they are also encouraged to give birth at home which further exacerbates maternal mortality. According to Shiferaw et al.:

The most important reasons for not seeking institutional delivery were the belief that it is not necessary (42%) and not customary (36%), followed by high cost (22%) and distance or lack of transportation (8%). The group discussions and interviews identified several reasons for the preference of traditional birth attendants over health facilities. Traditional birth attendants were seen as culturally acceptable and competent health workers. Women reported poor quality of care and previous negative experiences with health facilities. In addition, women’s low awareness on the advantages of skilled attendance at delivery, little role in making

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<sup>86</sup> Alemu. “Early Marriage in Ethiopia.”

<sup>87</sup> Alemu. “Early Marriage in Ethiopia.”

<sup>88</sup> “Girls Not Brides.” The Global Partnership to End Child Marriage. Accessed March 1, 2019.



decisions (even when they want), and economic constraints during referral contribute to the low level of service utilization.<sup>89</sup>

Even though there are other factors in play, the role of cultural beliefs and constraints that dictate a women's place of delivery should not be overlooked. Cultural obstacles also influence the decision to utilize prenatal care. According to Biratu and Lindstrom:

Studies of maternal health provide strong evidence of the beneficial effects of early prenatal care on fetal development and the process of giving birth. While cost and availability are major barriers to accessing prenatal care in many developing countries, lack of awareness of the importance of prenatal care and restrictions on women's health seeking behavior stemming from husband's disapproval remain as important barriers to prenatal care utilization even in areas where services are available.<sup>90</sup>

#### HIV/STDs/Unprotected Sex

I also showed that young brides become susceptible to HIV and STDs. The Population Council found: "The younger a bride is, the greater the age difference between her and her spouse. In Ethiopia, the mean age difference between spouses is 10.1 years if the wife marries before age 15 compared to 8.6 years if the wife marries at or after age 20."<sup>91</sup> UNICEF states:

Child brides are also significantly more likely to be exposed to sexually transmitted diseases, including HIV. This is because not only are they vastly more likely than their male peers to be married, but they are most often married to older men with whom they are more likely than their unmarried counterparts to have unprotected sex. The end result is that

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<sup>89</sup> Solomon Shiferaw, Mark Spigt, Merijn Godefrooij, Yilma Melkamu, and Michael Tekie, "Why Do Women Prefer Home Births in Ethiopia?" *BMC Pregnancy and Childbirth* 13, no. 1 (2013).

<sup>90</sup> Biratu and Lindstrom. "The Influence of Husbands Approval on Womens Use of Prenatal Care."

<sup>91</sup> Population Council, "Child Marriage Briefing."

married girls—compared to their unmarried but sexually active peers—are 50% more likely to have a sexually transmitted disease.<sup>92</sup>

In the data analysis, I showed that the younger the bride was, the less power she had when asking her husband to use a condom. Furthermore, women in rural areas have even less power than their urban counterparts. Therefore, the significant role played by cultural norms and practices is leading to poor health outcomes for women and cannot be disregarded.

### Domestic Violence

Domestic violence in the form of wife beating has gone down during the period 2000 to 2016. However, wife beating is still significant, and it remains much higher in rural areas than in urban areas. I noted five justifications for allowing a husband to beat his wife:

- She argues with him
- She burns the food
- She goes out of the house without telling him
- She neglects the children
- She refuses to have sex with him.

Regarding the justification for beating if the wife argues with her husband, the words of a 41-year-old Ethiopian man captures a common mindset behind this trend:

There is a saying, *uleen suphee duwwaa cabsa* which means, “A stick breaks only a clay pot.” Mostly elders in this community believe in the importance of the stick for controlling women. Such a traditional belief targets the way a woman dialogues with her husband. If a woman swears

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<sup>92</sup> UNICEF, [https://www.unicef.org/ethiopia/Evidence\\_Review.pdf](https://www.unicef.org/ethiopia/Evidence_Review.pdf).

at her husband, it is considered as looking down on him, so he has to punish her.<sup>93</sup>

It is important to note that among the other justifications for wife beating, this one has made the least progress, which gives some indication of who wields power in the household.

Since men are viewed as the power holders, and wives are considered to be subject to their husband's authority, if a woman leaves the house without informing her husband, it is viewed as undermining the husband's authority. Therefore, he must enforce his authority by beating her. Given the gender-based power roles in the household and cultural acclamations for upholding this power role, reductions in instances of wife beating for leaving the house without telling the husband have also proved to be slow.

From 2000 to 2016, justification for wife beating if she neglects the children is higher in rural areas compared to urban areas. Also reducing this trend has proved to be more problematic in rural areas than urban. In Ethiopia, the wife is responsible for their children. Therefore, if a wife fails to fulfill her obligation, in many cases a husband is required to take disciplinary action. Abeya et al. found: "Among the grounds for favoring wife beating was the notion that a husband is responsible for disciplining and putting an erring wife on the right track. And a man not wanting to punish his wife would be criticized as unmanly and docile (*Yewond Alcha*)."<sup>94</sup>

Participants in the Abeya study voiced numerous proverbs that highlighted their belief in the appropriateness of physical violence. Consider the following quotes excerpted from focus group discussions with men and women:

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<sup>93</sup> Abeya, et al., "Intimate Partner Violence against Women in West Ethiopia."

<sup>94</sup> Abeya, et al., "Intimate Partner Violence against Women in West Ethiopia."

“If a husband should not beat his wife, whom should he beat then?”

“What kind of husband is one who does not beat his wife?”

“He beats me because he likes me. Who else should he beat? If he hated me, he would not talk to me, let alone beat me.”

“A husband is like a corrector and administrator. He is expected to beat, punish, correct and put his wife on the right track.”<sup>95</sup>

Across the time period 2000 to 2016, justification for wife beating if she refuses to have sex has been substantially higher in rural areas compared to urban areas.

Reducing the numbers of instances, especially in the rural regions, has proven to be difficult because men believe they have the upper hand in deciding when to have sex.

Some men do not even consider a woman’s health when forcing sex. In some cases, women who refused to have sex are beaten by their husband and then forced to have sex.

According to Yigzaw:

A cultural perspective that condoned forced sex was that women do not express their sexual desire openly, and men would have to take the initiative, leaving matters of sex to their discretion. Similarly, a judge interviewee said the Family Law rules out the existence of marital rape; he said marital partners have a legal obligation to provide sex to each other. This group did not even like the mention of forced sex in marriage. They said the word is inappropriate in the context. . . . Coerced sex was perceived as another dimension of male dominance.<sup>96</sup>

## Employment

In Ethiopia, one factor that affects female employment is culturally established roles and practices that have the capacity to keep women in their gender-prescribed roles.

Care International found:

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<sup>95</sup> T. Yigzaw, et al., “Perceptions and Attitude Toward Violence Against Women by Their Spouses.”

<sup>96</sup> T. Yigzaw, et al., “Perceptions and Attitude Toward Violence Against Women by Their Spouses.”

In most households, men and women share labor inequitably. Some tasks are allocated predominantly or explicitly to women, others to men only, and some tasks are performed by both. The most obvious pattern in the gender division of labor is that women are mostly confined to routine domestic and caring tasks whereas men dominate in production of goods and services and/or wage labor where revenue can be earned.<sup>97</sup>

These roles keep women from participating in the formal economy. Thus, in order to increase female employment, the cultural beliefs that confine women solely to household duties need to be dealt with. Ethiopia must economically empower its women. How can the country's goal of economic prosperity and growth be realized when approximately half of the workforce is encouraged to stay at home? Also, a significant percentage of woman who are employed in the formal economy do not get paid for their work—a scenario that borders on slavery. This is a major human rights issue.

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<sup>97</sup> Care International, "Ethiopia: Gender in Brief." Available from: [https://www.care-international.org/files/files/Gender in Brief Ethiopia.pdf](https://www.care-international.org/files/files/Gender%20in%20Brief%20Ethiopia.pdf). Accessed March 1, 2019.

## Chapter VII

### Conclusion

Overall, this study has shown that cultural practices still undermine the best efforts of the Ethiopian government in its efforts to address these critical issues that are both a human rights abuse as well as a drag on economic development. In order to bring about change, cultural frameworks that promulgate or maintain the current status of Ethiopian women need to be dealt with wisely. In light of the capability framework used for this study, I have shown that the “functioning” of women is severely hampered due to cultural norms and practices.

This research found that early child marriage can impact female education and health. Most girls do not pursue their education further after they get married. The data showed that there are fewer girls who pursue secondary and higher education than boys in both urban and rural areas, but even more so in rural areas.

I showed that early child marriage also debilitates female health. Girls who marry early have a greater chance of contracting HIV and other STDs than girls who marry at an older age. Girls who marry early and give birth early have a higher chance of developing fistula, and they are also at a higher risk of facing maternal mortality. Another indisputable effect of early child marriage is that it reduces the economic status of women. A less-educated person is less likely to be economically empowered.

In the data analysis chapter, I showed that domestic violence is still high despite the progress that has occurred since 2000. Women at home are still beaten for trivial

reasons. Significantly reducing domestic violence, especially in rural areas, has proved to be difficult because violence is used as a tool to maintain the power dynamics between the husband and wife in the household.

Employment trends for women are not impressive either. The percentage of women employed in both urban and rural areas has declined since 2000. In 2016, 21.6% of women living in urban areas and 52.6% of women living in rural areas were not being paid for work done.

Overall, progress has been much slower in rural areas compared to urban areas when considering every variable analyzed in this research. Rural areas are more stringent about enforcing cultural norms and practices compared to urban areas. It is important to note that 80.8% of the Ethiopian population lives in rural areas.<sup>98</sup> Thus, the trends that are found in rural areas are more representative of the general current status of Ethiopian women when compared to urban areas.

Recently, the Ethiopian government implemented procedures and policies to foster women empowerment. For example, on December 16, 2017, the first all-female crew flight took off from Addis Ababa to Lagos, Nigeria.<sup>99</sup> Moreover, the current president of Ethiopia, Sahlework, is a woman. However, presidents in Ethiopia are only figureheads; the power lies in the hands of the Prime Minister who has always been male. Further, women comprise 50% of the Ethiopian cabinet; the Ethiopian defense minister is

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<sup>98</sup> "Ethiopia - Rural Population." Kenya Government Debt to GDP, 1998-2018. Available from: <https://tradingeconomics.com/ethiopia/rural-population-percent-of-total-population-wb-data.html>. Accessed March 01, 2019.

<sup>99</sup> Helen Coffey, "Ethiopian Airlines Operates First All-female Flight Crew in Africa," *Independent*, December 20, 2017. Available from: <https://www.independent.co.uk/travel/news-and-advice/ethiopian-airlines-all-female-flight-crew-pilots-addis-ababa-lagos-first-africa-a8120816.html>. Accessed March 1, 2019.

a Muslim woman; and prominent, high-ranking governmental positions were given to women.<sup>100</sup>

Although these reforms are promising, in order for them to translate into empowerment for Ethiopia women in both rural and urban regions, more grassroots efforts need to undertaken. With many of the current political reforms, it may seem as though the dreams of women empowerment are beginning to be realized. However, one must realize that millions of Ethiopian women are still live their lives confined within cultural norms and practices. In order for them to break out of these confines, and considering the problems that have been mentioned in this thesis, relevant laws and policies need to be drafted. However, laws and procedures will *only* be successful if they are part of an open dialogue and in partnership with of the government and local village leaders in addressing cultural norms and practices that hinder women.

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<sup>100</sup> Schemm, Paul. "In Ethiopian Leader's New Cabinet, Half the Ministers Are Women." *The Washington Post*. October 16, 2018. Accessed March 01, 2019.



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