

GAGE Research Brief

**Exploring Ethiopian
adolescents' gendered
experiences and
perspectives**

Nicola Jones, Bekele Tefera, Guday Emirie,
Workneh Yadete, Kiya Gezahegne,
Kassahun Tilahun, Kiros Birhanu

October 2017

Introduction

It is increasingly recognised that the 2030 Agenda for Sustainable Development and its sustainable development goals (SDGs) will not be realised without critical interventions to support today's generation of adolescents. Adolescence has powerful impacts on young people's capabilities – in part because of the physical transformations wrought by puberty, which are considered second only to those experienced in infancy and early childhood in terms of their scope and speed, and in part because of how children's place in the family and broader community shifts as they approach maturity. While there is recognition that these transitions are profoundly gendered, globally there are still significant evidence gaps in the diverse ways in which adolescents experience these changes individually and collectively, which in turn impact on the ability to invest in tailored change strategies (The Lancet, 2017).

The DFID-funded Gender and Adolescence: Global Evidence (GAGE) programme's timeframe (2015-2025) presents an excellent opportunity to strengthen the evidence base on adolescents and promote evidence-informed policy and programming to fast-track progress for adolescents within the SDG framework. This research synthesis summarises findings from formative qualitative work about adolescent girls and boys in three diverse locations in Ethiopia. Ethiopia has been selected as a focal country for GAGE because of its very large adolescent and youth population (at 21%, the highest globally according to the Population Reference Bureau, 2017), its socio-cultural and geographical diversity, and strong governmental commitments to advancing the wellbeing of adolescents and to promoting greater gender equality. Ethiopia has integrated the SDGs within its Second Five-Year Growth and Transformation Plan (GTP II) spanning

the period 2015/16 to 2019/20, signalling strong national ownership of this agenda. The country has also seen rapid progress in terms of girls' education over the last decade and a half (having reached gender parity for primary education), in expanding healthcare, including adolescent health services and free contraception to village level, and with 41% percent of girls married before their 18th birthday, it has also committed to ending child marriage and female genital mutilation/cutting (FGM/C) by 2024 UNICEF, 2016.

Methodology and research contexts

The qualitative data collection underpinning this research synthesis took place in mid-2016 in three diverse regional states of Ethiopia. As Table 1 highlights, according to the most recent Demographic and Health Survey data, each of these states presents distinct starting points in terms of adolescent capability challenges. The specific communities in which we carried out the research display distinct rural versus urban dynamics and highlight the role that particular socio-cultural traditions play in shaping the age and gender norms that mediate adolescent experiences: Farta District in the highlands of Amhara Regional State; Chiro Town a newly urbanising city in West Haraghe, Oromia Regional State; and Semurobi District in Afar Regional State with its large pastoralist population (see Table 2). Together, these sites allowed us to capture some of the complexities of gendered adolescent experiences in rural and urban Ethiopia.

The study interviewed more than 500 participants: approximately 300 were adolescents of different ages (but with a focus on early adolescents aged 10-14) and 200 were adults – including parents, other

Table 1: Differences in gendered indicators in GAGE Ethiopia's three focal regional states

Region	Teenage motherhood	Contraception (any)	All basic vaccinations	Malnutrition	Domestic Violence**	Anaemia among children	Female Genital Cutting	HIV Awareness (men)	HIV Awareness (women)
Afar	23.4%	11.6%	15.2%	1.6	21.7	73.2%	91.2	32.6%	14.1%
Amhara	8.3%	47.3%	45.8%	1.4	37.1	41.4%	61.7	45.5%	28.7%
Oromia	17%	28.6%	24.7%	1.1	39.2	63.8%	75.6	38.1%	22.1%

Source: USAID DHS Ethiopia (2016)

Table 2: Overview of research sites and key characteristics

	Farta district, Amhara	Chiro town, West Haraghe, Oromia	Semurobi district, Zone 5, Afar
Population	Highland Amhara Woreda pop. 232,181	Diverse ethnic groups; Town pop. 67,000	Afari majority, some highland settlers; Woreda pop. 32,032
Topography	Mountainous, remote, limited transportation	Accessible	Lowland, no access to transportation
Livelihoods	Subsistence agriculture	Chat cash crop	Pastoralist
Food security	Food insecure	Drought-affected	Chronic drought
Migration	High out migration for seasonal work	In-migration for domestic work, petty trade, chat economy; out-migration to Middle East	Out-migration to Djibouti
Religion	Orthodox Christian	Muslim, Orthodox Christian, Catholic, Protestant	Muslim
Child marriage	22.3% of girls under 18 years marrying	32.3% of girls under 18 years marrying	10.4% of girls under 18 years marrying
Adolescent programming	Care Ethiopia's TESFA SRHR program with married girls, including social norm change with gatekeepers. School-based girls' clubs	Pro-Pride working on HIV issues but recently discontinued	Save the Children and Care adolescent girls' education programming

adult community members and key informants at the community and sub-national levels. We used a variety of interactive and participatory tools to explore, with adolescents and adults, what adolescent transitions look like for girls and boys. Using community timelines, body- and community-mapping, and vignettes, we focused on how local communities see adolescence as a life stage and how different groups of children face different threats and opportunities in regard to a range of capabilities, including education, physical health, bodily integrity, psychosocial wellbeing, voice and agency, and economic empowerment. Using family timelines, decision-making charts, and exercises designed to explore adolescents' worries and aspirations, we sought to understand the complexity of young people's lives and how and where interventions might be aimed for maximum effect.

Adolescents' multi-dimensional capabilities

The framing of our research on gendered adolescent experiences is informed by a capabilities approach, emphasising that in order to successfully transition from adolescence to a healthy and empowered adulthood, adolescent girls' and boys' interlinked capabilities need to be supported. Championed originally by Amartya Sen

(1984; 2004), and nuanced to better capture complex gender dynamics at intra-household and societal levels by Marta Nussbaum (2011) and Naila Kabeer (2003), the capabilities approach has evolved as a broad normative framework exploring the kinds of assets (economic, human, political, emotional and social) that expand the capacity of individuals to achieve valued ways of 'doing and being'. At its core is a sense of competence and purposive agency: it goes beyond a focus on a fixed bundle of external assets, instead emphasising investment in an individual's skills, knowledge and voice. Importantly, the approach can encompass the ways in which the acquisition of key capabilities during adolescence is a deeply gendered process, as gendered norms become increasingly enforced and personally salient as girls (and, in different ways, boys) reach puberty. For many girls in the Global South, the years of early adolescence, rather than expanding their worlds – as is common for boys and for girls in the Global North – often see them contract as they have to leave comparatively free childhoods and are compelled to follow the gendered adult pathways of their local environments (Harper et al., 2017). Gender inequalities in turn are often compounded by poverty and other inequalities such as ethnic minority or disability status, rendering full human capability achievement even more challenging.

Education and learning

Ethiopia has made remarkable progress in equitably expanding primary education over the last two decades (UNESCO, 2015). Its primary school net enrolment rate (NER) increased from 20% to 84% between 1996 and 2012, the proportion of girls aged 15 to 19 with no education is less than half that of their slightly older peers (13% versus 32% for women aged 20-24), and in 2014 the overall enrolment rate for girls aged 7-18 years was higher than that of boys (66% versus 64% nationally) (EMIS, 2014; CSA, 2014a; CSA and World Bank, 2015). Our research confirmed that there have been significant improvements in adolescent girls' physical and social access to education over the last 15 years, and that this is underpinned by marked changes in both adolescent and adult aspirations for girls to be educated, at least until the end of primary school (8th grade). The following quote, highlighting a significant generational shift, is illustrative:

I am eager to teach my kids and I have never failed so far. My priority is to make sure they get a proper education. I don't want them to regret the lives they will have as I am doing. I am trying to keep them in school, with God's help. (Mother, IDI, Semurobi)

That said, there remains significant scope for improvement in terms of adolescent girls' educational opportunities. Not only do their enrolment rates remain very low in emerging regions such as Afar and Somali (Bastian et al., 2013; MoE and UNICEF, 2012), but girls are significantly more likely than boys to drop out of primary school and to have to repeat a primary grade (EMIS, 2014). This is largely because they remain responsible

for the bulk of household chores, which not only prevents them from doing homework but also precludes regular attendance (see also Pankhurst et al., 2016a). As a result, gender disparities in the higher grades remain marked. For example, the NER for 9th and 10th grades is only 41% for girls versus 56% for boys (EMIS, 2014), while girls' scores on the exams taken at the end of 8th, 10th and 12th grades are much lower than those for boys.

Our findings from our two rural sites in Amhara and Afar echoed these national findings on adolescent girls' time poverty representing a critical challenge to their educational attainment, as this quote highlights:

'[My mother] can't be everywhere at once. She can't take care of the house, go herding, and attend meetings. She can't do all these at once. I am the one who raises the kids' (14-15 girl, IDI, Semurobi)

By contrast, in our urban site, Chiro, domestic responsibilities did not emerge as a concern in terms of school dropouts.

Over-age school entrance also appear to be a barrier to girls' educational success in our focal sites, affecting a considerable proportion of girls we interviewed who were over-age for their grade. A number of parents remarked that their daughters were too young to be in school at seven years old, and instead deemed nine or ten more appropriate, a delay that makes it less likely that girls can make the critical transition from primary to secondary school before marriage pressures set in. Similarly, fears about failing national exams were repeatedly mentioned as among the most significant worries affecting both adolescent girls and boys – fears exacerbated by the

Box 1: School violence: a key concern for Ethiopian adolescents

Across all three sites adolescent boys and girls alike strongly complained about harsh corporal punishment and a sense of teacher impunity, as these quotes underscore:

Male teachers beat us. Female teachers are kind and thoughtful. They don't beat us. They might insult us. If the teachers beat us, we don't understand what they are teaching us. (10-year-old girl, Wuqro, Farta)

Oh! They are monsters. They beat you cruelly. (12-year-old girl, Wuqro, Farta)

The teachers punish students with sticks and plastic pipes. They beat students when they are late and talk in the class. (11-year-old girl, Chiro)

Bullying between boys, boys' violence towards girls, and in some cases student-teacher violence, emerged as significant community issues for which there are no adequate reporting and redress systems within schools or the justice system:

It has been a problem these days. Not only beating of girls but they [boys] also fight with male teachers. Especially when they reach to grade seven and eight, when they become adolescents, they pinch the girls, they beat them. (Kil with female teacher, Semurobi)

We have also heard about a new sort of fighting which is termed as 'bububububub...'. It simply means 'come and fight with me'. It emanates from the interest of being powerful and a winner... If no one fights with them, they can conclude that they are leaders of that community adolescent group... This is especially true in high schools. (Fathers' focus group discussion, Wuqro)

problems facing older, unemployed adolescents in the community, who illustrate the limited opportunities that school dropouts face.

Strong concerns were also raised about school violence by adolescents, especially in terms of the risk of age- and gender-based violence on the way to and at school (see Box 1; see also Pankhurst et al., 2016b)). Sexual and gender-based violence in school also emerged as a significant concern among adolescent respondents in Chiro, following several alleged incidents in which school authorities were reported not to have taken adequate action, highlighting the need for more robust child protection systems to be embedded within the education system.

Health and SRHR

Evidence regarding Ethiopian adolescent girls' physical health is primarily limited to the sexual and reproductive health (SRH) behaviours of those over the age of 15, with younger girls' and other healthcare needs (including nutrition) rarely addressed. In large part this is because older girls' SRH needs are pressing. Social norms, which push married girls to demonstrate their fertility, limit unmarried girls' access to contraceptives despite national policies aimed at increasing uptake, and largely preclude girls' ability to negotiate condom use. Adolescent pregnancy is common (9% of 17 year olds and 34% of 19 year olds have begun childbearing) and girls aged 15-24

are five times more likely to have HIV than boys the same age (CSA and ICF International, 2012).

Our focus on younger adolescents enabled us to complement the existing evidence base on adolescent health, revealing that adolescent girls in particular have very limited knowledge about puberty, including menstruation and menstrual hygiene, and that for many girls the onset of menstruation can be a fearful experience. This was particularly the case in Afar, where menstruation remains highly stigmatised, not least as it is also still a marker for marriageability:

When menstruation comes she does not move from one place fearing that people might see her. She simply sits down and she does not appear before other people... It is disgracing: your clothes might be seen when you are among others and when you stand up. (10-12-year-old girl, Semurobi)

When menstruation comes to my friend and me, I will ask my older sister how she hides that from family. In this place it is taboo to show to the mother. It should not be seen. If the mother sees that, [the daughter] will be married. So I will consult [my sister] about this issue. (FGD girls, Semurobi)

Access to school-based girls' clubs, 'good brothers' clubs', and pro-active health extension workers – which we found in Farta but much less so in the other two sites – provide important sources of information for adolescents, especially since parents often reported



Girls in FGD in Chiro Town. Credit: Kiros Berhanu.

feeling either unprepared or unwilling to play this role.

They teach us at school about menstruation and what to do. They tell us it is nothing to be ashamed of, that we only need to keep ourselves clean. They give out pants and sanitary pads at school. (Girl, 10 years, Wuqro)

Boys participating in Good Brothers' Clubs also noted the positive effects of participation in terms of the moral support they are able to provide their female peers:

We learn about and discuss gender equality in 'Good Brothers Club'. We learn that we have to fully support girls during the time they face menstruation...and that she has to accept it as a normal condition. We also learn that rape is a bad culture and that we have to fight it... We have to advise the boys that rape is crime and a harmful traditional practice. (Body mapping, 10-12-year-old boys, Wuqro)

In the case of boys' physical health, substance abuse – alcohol in Farta and chat in Chiro and Semurobi – emerged as a significant issue about which there is limited evidence. Given high levels of community concern and linkages to community and gender-based violence, this would seem to be an issue that requires more in-depth exploration over time:

Male children are becoming badly behaved because of the reluctance of parents to control their male children. Male children are highly exposed to addictions (cigarette, games, chewing chat, etc)... Many male children become jobless and they are dependent on their parents at a time when they have to establish an independent livelihood. They spend their precious time together with their male friends...on unnecessary things. There are widespread addictions in the community... Addiction is like unwanted or invisible pregnancy but for male children. (FGD fathers, Chiro)

Bodily autonomy, integrity and freedom from violence

Ethiopian girls face multiple and severe threats to their bodily autonomy, including child marriage, FGM/C, and physical and sexual violence. While declines in child marriage are rapid and appear in some regions to be accelerating, elimination remains a distant goal: over 40% of young women aged 20-24 were married as children (CSA and ICF International, 2012). Most girls (70%) married before adulthood had their marriages arranged (to a man seven years their senior, on average), with the youngest brides the least likely to have

known about their marriages in advance (Population Council and UNFPA, 2010; Frede and Erulkar, 2009). Underscoring the country's diversity, and highlighting the importance of tracking progress at sub-national levels, child marriage appears to be becoming more common in some regions – and increasingly driven by adolescents themselves rather than parents (Jones et al., 2016; Pankhurst, 2017). Our findings also echo an important degree of change with adolescent girls increasingly exercising more agency in terms of the age and choice of marriage partner, especially in Farta and Chiro; but in all three sites child marriage persisted, even if it is increasingly initiated by young people rather than arranged by parents. Despite growing awareness of the criminalisation of child marriage in Ethiopia (defined as marriage below 18 years), powerful gender norms relating to the importance of adolescent girls' sexual purity before marriage and the social disgrace of being unmarried after late adolescence, serve to perpetuate this harmful traditional practice. In Chiro, recently emerged marriage brokers are fuelling the problem by helping older grooms entice or trick girls into marriage, while in Semurobi the Afari absuma practice of marriage among cross cousins (mother's brother or father's sister's child) dominates the life trajectories of many adolescent girls, often precluding secondary education and economic empowerment opportunities.

There are brokers who lobby girls to accept a marriage proposal. They urge girls to marry, saying that instead of becoming a domestic servant for their parents, saying they should marry and lead an independent household... Overburdened girls are the most exposed once to early marriage and marriage through lobbying. (KII with Woreda Women & Children Officer, Chiro)

In a similar vein, FGM practices were reported to be declining in all three sites, but still practised in clandestine ways given greater (if often partial) awareness of the government's strategy to eradicate harmful traditional practices, including FGM, on the one hand, and the stickiness of gender norms, on the other.

Physical and sexual violence remain widespread in Ethiopia. For example, the Population Council and UNFPA (2010) found that of married girls between the ages of 12 and 24, 17% of urban girls (versus 11% of rural girls) had experienced at least one form of intimate partner violence. The same study found that 12% of urban and 16% of rural girls had been raped, with a variety of

research highlighting that schools are common sites for violence against girls (e.g. Tefera et al., 2013; Woldehanna et al., 2008). Overall, our findings also reinforced the highly pervasive nature of physical and sexual violence risks that adolescents are exposed to at home, in school and in the community, and the significant concern that adolescents feel in relation to such violence. In Farta, while child marriage rates are reportedly declining, high levels of concern were expressed about a rising phenomenon of rape by abduction whereby adolescent girls are reportedly abducted by groups of adolescent males or young men, and then exposed to rape over a period of weeks or months before being discarded. In Chiro, adolescent respondents highlighted the risks of sexual violence, especially among migrant girls who typically have come to the town in search of domestic work but owing to limited opportunities may end up in exploitative commercial sex work. Adolescent girls also face the risk of sexual violence due to a dearth of safe public spaces for them. Boys and some of their female peers also expressed fears around friends and relatives becoming embroiled in political uprisings, reflecting the political situation at the time. Finally in Afar, adolescent girls and boys emphasised their fears relating to clan conflicts, and especially those that could be triggered by tensions over absuma marriage partnerships.

Psychosocial wellbeing

While the literature base addressing girls' psychosocial wellbeing is small and poorly disaggregated, overall research suggests that mental illness burdens in Ethiopian children are high (between 12% and 25% – MoH, 2012) and that some groups of girls are particularly vulnerable, including married girls (FORWARD and PFDI, 2014), girl domestic workers who face high levels of social exclusion and isolation (Erulkar and Ferede 2009; Erulkar and Mekbib, 2007), and girls who have faced sexual abuse (Garoma et al., 2008; see also Marsh et al., 2009; Wondie et al., 2011). Child marriage has also been found to have negative effects on girls' psychosocial wellbeing (Jones et al. 2016a). Overall, our findings across all three sites highlighted that rural adolescents and especially girls have very limited support networks outside family, although girls' clubs offer important opportunities for peer interaction, as was highlighted by adolescent girls in Wugro. Suicidal feelings or escape through migration are commonly mentioned in response to forced marriage, as

these quotes underscore:

The issue of absuma is very difficult. Even if she loves somebody else, she will be married forcefully. Due to this, there are females who commit suicide. As a result, nowadays, the government officials as well as religious leaders are teaching the community that girls should marry the one they love rather than forced to marry their absuma. (FGD with fathers, Afar)

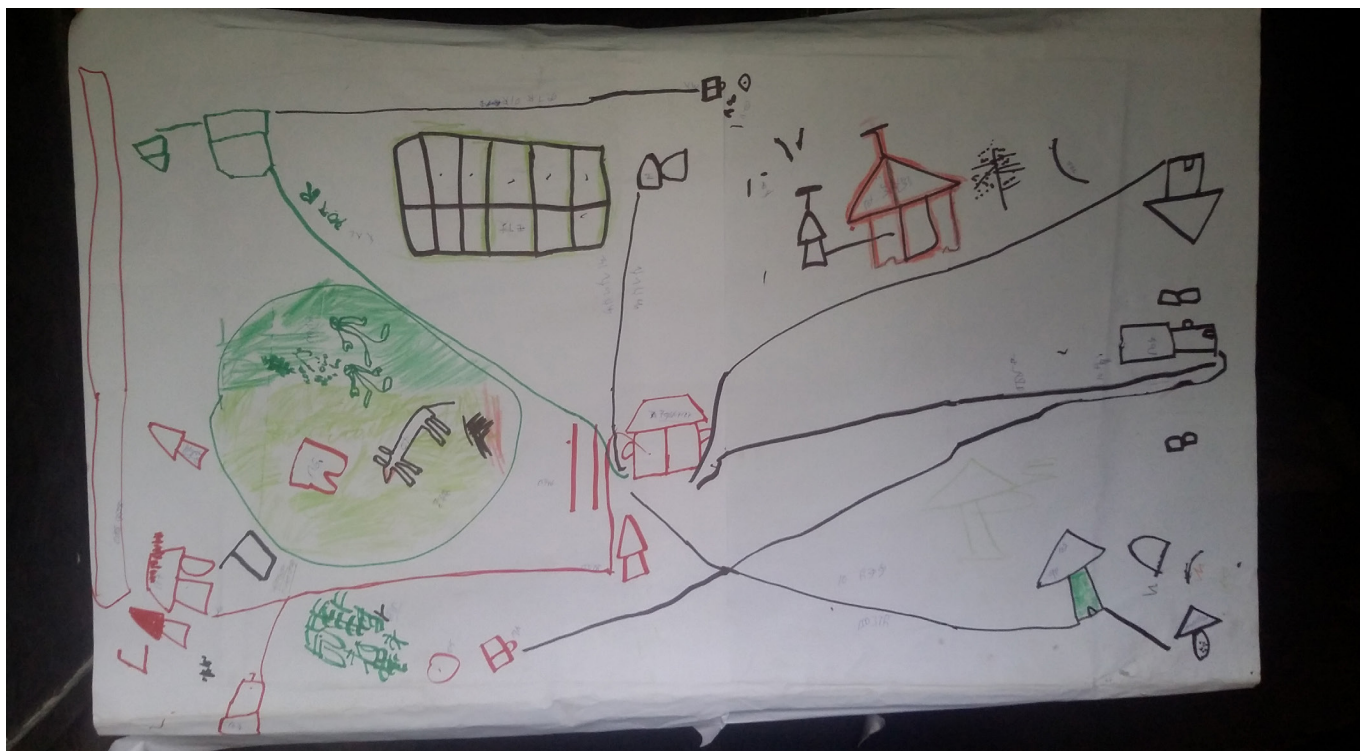
Girls in this area want to go to school... Very recently, a girl threw herself from a mountain when her parents took her out of school to get married. Because of her desire to stay in school, she tried to commit suicide. She was sent to Debre Berhan to be hospitalised. (FGD with females, 14-15 years, Wugro, Amhara)

I will not agree to a wedding and I will not listen to them if they want to marry me off. I will show them. I will hide and run to Komami and then I will go to Robi and to Semera. I will run away. If I go to Semera, they will not find me. I will then go to school there. I will start to live my life there. (IDI, girl, 15, Semurobi)

Adolescent girls' access to mass media and technology, which can expand horizons and reduce social isolation, is highly limited. Less than 40% of girls between the ages of 15 and 19 have any regular exposure to mass media (CSA and ICF International, 2012) and few girls between the ages of 12 and 17 have access to even a shared mobile phone (Tefera et al., 2013). Urban adolescents, and especially boys, have more access to the internet and regularly meet with peers to play online games and in some cases to watch pornography together. However, in the absence of adult guidance on appropriate use of mobile phone and internet technology, there are concerns by adolescents and adults alike that connectivity may not fulfil its positive potential as a source of information, empowerment and social connectedness.

Most parents think that WiFi and internet have benefits. They do not realise the negative impact of these new technologies. Only educated parents can understand this. (Community mapping, boys, 14-15, Chiro)

Young boys and girls use mobile phones to watch unnecessary films and games. It also facilitates communication between boys and girls, which pushes them to love relationships. Girls communicate even with men who have money and this has exposed them to unsafe sexual relationships. (Community mapping mothers, Chiro)



Community map by adolescent girls in Wuqro. Credit: Kiya Gezahegne.

Voice and agency

There is evidence of both progress and stasis in regard to girls' voice and agency. While research has found that some girls are able to bargain with their parents to stay in school if they pass exams (Mjaaland, 2016), choose their own marriage partner (Jones et al., 2016b, Camfield and Tafere, 2011, Pankhurst et al., 2016c), or make household decisions in partnerships with their husbands (Getahun, 2010; Population Council and UNFPA, 2012), on the whole social norms continue to affect most girls' trajectories in myriad ways. From birth, girls are socialised to be obedient (Mjaaland, 2016; CRS, 2013; Camfield and Tafere, 2011), while adolescence brings restrictions rather than freedom for adolescent girls, as girls' chastity is central to family honour (Jones, 2016b). Nearly 95% of girls between the ages of 12 and 24 reported that they needed permission to leave the house (Population Council and UNFPA, 2010), with girls who fail to comply stigmatised as impure and immoral. Overall, our findings resonated with the broader evidence base on adolescent girls' limited opportunities to exercise voice and agency, and in addition to limited avenues for voice and agency within the home and at school, indicated that adolescent girls are often excluded from participation in religious institutions, even though these are often a key part of local socio-cultural identities.

And our husbands used to tell us, 'you are too young to be sinner and you don't need to go to be cleansed. Church is meant for older people. Stay at home and look after the cattle.' There is also a saying 'yelijinet tsidik, yesilicha sinik' /childhood virtue and good doing cannot last long, just like a small sack of food that is taken for long distance travel. (Tesfa Program Recipients, adolescent married girls aged 16-19, Wuqro)

In the Ethiopian Orthodox church, female students are more active in early ages but this declines as their age increases because parents do not feel confident to send teenage girls to church as they may face sexual assaults on the way... or visit their boyfriends under the pretext of going to church. (Education office, Chiro)

The females cannot go to mosque with male if there is no mosque built for them. They do not bow for prayer with males. (Community mapping, girls aged 16-19, Semurobi)

Economic empowerment

Adolescent girls' access to economic empowerment is shaped by a variety of forces that include macroeconomic trends, population dynamics and social norms. Despite recent economic growth, Ethiopia remains one of the world's poorest countries, and largely agricultural. In addition, high fertility rates have resulted in a labour market unable to absorb the country's youngest workers,

who are disproportionately likely to be unemployed or under-employed (ILO, 2013). Girls and young women bear the brunt of disadvantage. They are not only less likely than their male peers to work for pay, as they are expected to spend their time providing their families with free labour (CSA, 2014b), but they have an unemployment rate more than three times that of boys (50% versus 14% for those aged 15-19) (CSA and ICF International, 2012) and wages one-third to one-half lower due to a gender pay gap that has been growing in recent years (Gable, 2013).

I have had no choice. I have to like herding and other family works. (14-15, IDI, girl Wuqro)

We also learn many things from friends. Girls learn domestic works from female friends. Boys learn to play football. (14-15, Body Mapping boys, Chiro)



Girls in FGD in Semurobi Afar. Credit: Kiros Berhanu

Especially rural adolescents have a heavy work burden. Children are obliged to go for paid work in order to buy their school materials. They don't have time to study and do their assignments. Most children drop out of school during harvesting season to support their parents (Adult, KII, Education Officer, Wuqro)

Girls' economic empowerment is limited in other ways as well. For example, they face more pressure than boys to turn their wages over for household use (Pankhurst et al., 2016).

In fact, they [girls] can also carry and sell wood. But they give the money to our parents rather than using it for entertainment. (14-15, Community Mapping boys, Wuqro)

Due to the limited non-farm work opportunities available to girls in rural areas, migration is an increasingly common path (Bezu and Holden, 2014a, 2014c; Tadele and Gella, 2012), with girls as young as 13 migrating both domestically and internationally, primarily to engage in domestic work which all too often leaves them vulnerable to exploitation and sexual abuse (Crawford et al., 2013; Pankhurst et al., 2016; Erulkar et al. 2006). Our findings in Chiro revealed similar concerns about migration often failing to provide adolescents with decent work opportunities:

Girls work in cafes, bars and hotels. Some of them move to other cities because they do not want to work in cafe in a place where they were born and grown up. Some of them migrate from place to place and they get involved in commercial sex work. There are many young girls working on streets for sex during the evening. They migrate to this city from the nearby rural woredas and kebeles. (Adult, Mother, IDI, Chiro)

While some adolescents migrating to Arab countries to find employment as domestic workers have reaped the benefits of significantly higher earnings, there is also growing awareness of exploitative labour practices and the risks of physical and sexual violence en route to and in destination countries:

Most girls who have left to Jeddah now have a steel-roofed house. They have sent money for their parents to buy a rifle... We have heard that they are paid well. (Adult, Mother, Semurobi)

We hear of girls whose salaries were taken by their employers. We also know of girls who came back mentally ill. (14-15, IDI girl, Semurobi)

I am too afraid to send my daughter. I fear the road and the risk. (Adult, Mother, Semurobi)

Implications for policy, programming and evidence

Overall, the GAGE formative qualitative research underscored the complexity and interlinked nature of the challenges to adolescents' full capability development in the Ethiopian context, and the critical role that context-specific gendered norms and practices play in shaping adolescent girls' capabilities. Our findings suggest that adolescent experiences are changing rapidly compared to past generations, especially in terms of girls' physical and social access to schooling, but that discriminatory gender norms remain sticky (see Figure 1). Moreover, dynamics across sites vary markedly, both in terms of

socio-cultural norms and practices, as well as between rural and urban settings, indicating that highly tailored programming strategies are necessary. However, programming for adolescents – both governmental and NGO – is currently very limited in coverage and scope.

In terms of possible implications for policy, programming and the related evidence base, Table 3 maps out our findings vis-a-vis both national policy and international SDG-related commitments. We also highlight where additional investments are urgently needed to address key evidence gaps and measurement of progress towards the SDGs, and to which future rounds of the GAGE longitudinal research study could contribute over time.

Figure 1: Summary of key findings per research site

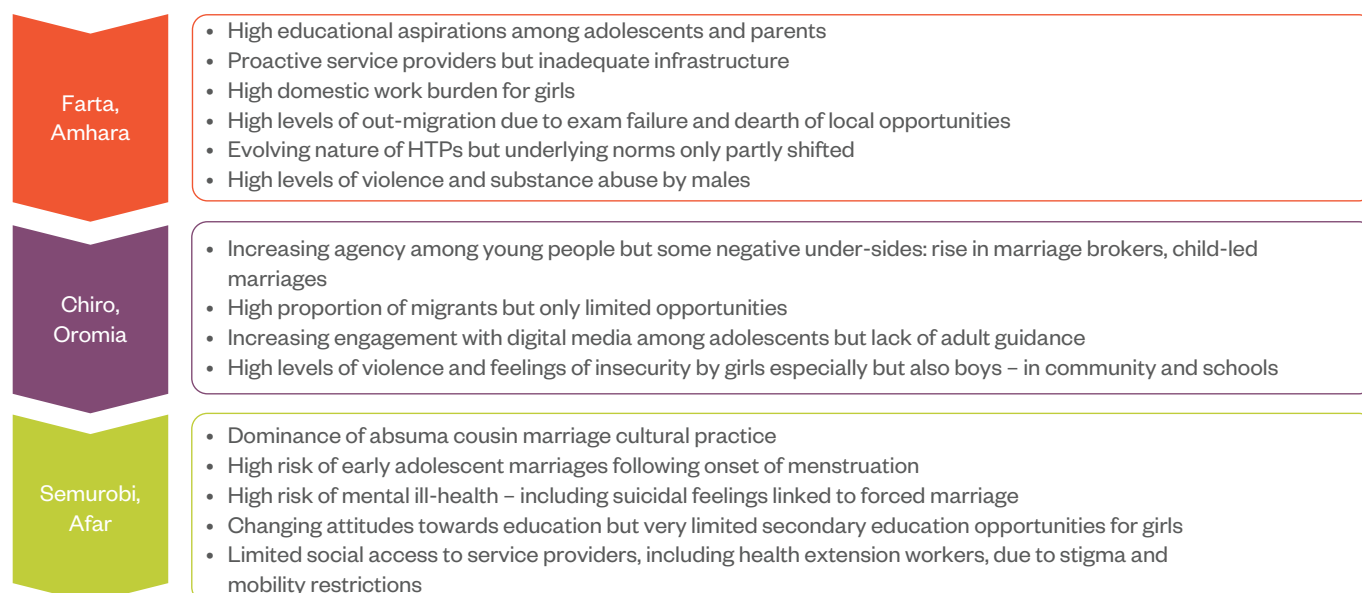


Table 3: National policy commitments and international SDG-related commitments

	Insights highlighted by formative qualitative research	Need for strengthened evidence base	Resonance with Ethiopian policy commitments	Resonance with international commitments, including SDGs
Education and learning	Significant improvements in educational aspirations for and by girls but widespread concern regarding school violence – by teachers and pupils – and inadequate reporting and redress	Improved monitoring and measurement of school violence; to understand teacher attitudes, and support to exercise non-violent teaching methods and better address student violence	Compliance with article 36 of the Constitution 1995 provision against corporal punishment in schools	SDG Goal 4: Education Provide child, disability and gender sensitive and safe, non-violent, inclusive and effective learning environments for all
SRHR, health and nutrition	Limited awareness of puberty, menstruation and menstrual hygiene and related fears	Ethiopia has very high adolescent fertility rate; critical to assess over time what promotes meaningful social access to adolescent-responsive information and services	Widespread health extension service which includes adolescent health in core package of 16 interventions	SDG Goal 3: Health and Wellbeing Ensure universal access to sexual/ reproductive health-care services, including family planning, information, education; strengthen prevention/ treatment of substance abuse
Bodily integrity	Child marriage and HTPs are declining in response to growing awareness of law and negative consequences for girls, but also evolving into more clandestine practices due to stickiness of underlying gender norms	While targets are important, need to understand evolution of gender discriminatory practices and norms, and explore relative efficacy of different intervention strategies	Since 2004 Penal Code provides no exemption to criminal charges against abduction and rape in the case of marriage 2010 Strategic Plan on Violence Against Women and Children	SDG Goal 5: Gender Equality Eliminate all harmful practices, such as child, early and forced marriage, FGM; eliminate all forms of violence against all women and girls in the public and private spheres
Psycho-social wellbeing	Psychosocial support outside of families is very limited; child marriage and exam pressures are a major source of stress and even suicidal feelings	Collect better data on psychosocial wellbeing and mental health and individual and family responses in order to inform tailored responses for adolescents	Explore role of social workers helping adolescents at risk of psychosocial ill-being as social worker cadre is rolled out, and broader linkages to social protection, eg. Productive Safety Net Programme	SDG Goal 3: Health and Wellbeing Promote mental health and well-being
Voice and agency	Adolescents have limited opportunities to exercise voice and agency, especially younger and female adolescents including in religious institutions	Track adolescents' engagement with digital media over time and approaches that encourage positive use	Consider embedding opportunities for girls' voice and agency including exposure to positive role models and in community behaviour change communication activities on HTPs	SDG Goal 10: Inequalities Ensure responsive, inclusive, participatory and representative decision-making at all levels
Economic empowerment	Opportunities for economic empowerment are very limited, especially in rural communities; migration provides only limited options for decent work	Explore extent to which young people are benefiting from the new youth employment strategies and opportunities for strengthening these programmes	GTP II aimed to reduce employment among women and youth, including now through a new revolving fund for job creation and systematic deployment on development interventions	SDG Goal 8: Decent Work Achieve full and productive employment and decent work for all women and men, including for young people

Select references

Bezu, S. and Holden, S. (2014). Rural-urban youth migration and informal self-employment in Ethiopia. Oslo: Norwegian University of Life Sciences.

CSA. (2014a). Ethiopia Mini Demographic and Health Survey 2014. Addis Ababa: Central Statistical Agency.

CSA. (2014b). Ethiopia Time Use Survey 2013. How women and men spend their time. Main report. Addis Ababa: Central Statistical Agency.

CSA and ICF. (2016). Ethiopia Demographic and Health Survey 2016: Key Indicators Report. Addis Ababa, Ethiopia, and Rockville, Maryland, USA: CSA and ICF.

CSA and World Bank. (2015). Ethiopia Socioeconomic Survey (ESS) - 2013/14. Survey Report. Addis Ababa: CSA and World Bank.

Harper, C., Jones, N., Marcus, R., Ghimire, A., and Bantebya, G. (eds.). (2017 forthcoming) Adolescent Girls and Empowerment: Towards Gender Justice. Routledge: UK.

Jones, N., Tefera, B., Emirie, G., Gebre, B., Berhanu, K., Presler-Marshall, E., Walker, D., Gupta, T. and Plank, G. (2016). One size does not fit all: The patterning and drivers of child marriage in Ethiopia's hotspot districts. London: UNICEF and ODI.

Pankhurst, Alula, Gina Crivello and Agazi Tiumelissan (2016a) 'Children's Work in Family and Community Contexts: Examples from Young Lives Ethiopia', Young Lives Working Paper 147

Pankhurst, Alula, Nathan Negussie and Emebet Mulugeta (2016b) 'Understanding Children's Experiences of Violence in Ethiopia: Evidence from Young Lives' Office of Research - Innocenti Working Paper WP-2016-25.

Pankhurst, Alula, Agazi Tiumelissan and Nardos Chuta, (2016c) 'The Interplay Between Community, Household and Child Level Influences on Trajectories to Early Marriage in Ethiopia: Evidence from Young Lives' Young Lives Working paper 162.

Pankhurst, Alula (ed.) (2017). Change and Transformation in Twenty Rural Communities in Ethiopia: Selected aspects and implications for policy. EthiopiaWIDE: Addis Ababa

Patton GC, Sawyer SM, Santelli JS, Ross DA, Afifi R, Allen NB, et al. (2016) Our future: a lancet commission on adolescent health and wellbeing. The Lancet 387(10036): 2423–78

Population Reference Bureau (2017). 2017 World Population Data Sheet. Washington: Population Reference Bureau.

Sen, A.K. (2004) 'Capabilities, lists, and public reason: Continuing the conversation', Feminist Economics 10(3): 77–80.



GAGE Programme Office

Overseas Development Institute
203 Blackfriars Road
London SE1 8NJ
United Kingdom
Email: gage@odi.org.uk
Web: www.gage.odi.org

About GAGE

Gender and Adolescence: Global Evidence (GAGE) is a nine-year longitudinal research programme generating evidence on what works to transform the lives of adolescent girls in the Global South. Visit www.gage.odi.org.uk for more information.

Disclaimer

This report is an output of the GAGE programme, which is funded by UK aid from the UK Department for International Development (DFID). The views expressed and information contained within are not endorsed by DFID, which accepts no responsibility for such views or information or for any reliance placed on them.

Copyright

Readers are encouraged to quote and reproduce material from this report for their own non-commercial publications (any commercial use must be cleared with the GAGE Programme Office first by contacting gage@odi.org.uk). As copyright holder, GAGE requests due acknowledgement and a copy of the publication. For online use, we ask readers to link to the original resource on the GAGE website, www.gage.odi.org

© GAGE 2017. This work is licensed under a Creative Commons Attribution – NonCommercial-ShareAlike 4.0 International Licence (CC BY-NC-SA 4.0).

Front cover: Rod Waddington, Tigray, Ethiopia 2012. CC BY-SA 2.0

