

Community Dialogue on Cultural and
Traditional Practices kit

BESO II/SCOPE Project

Part one: Objective of the kit

This kit is produced to create dialogue among community elders, teachers, students, and practitioners on harmful traditional and cultural practices. Using this kit, it is hoped that communities will have a better understanding on the negative consequences that harmful traditional and cultural practices bring on girls' enrolment, retention, achievement, gender parity in schools. And show the severe physical and psychological trauma that children undergo during and throughout their adulthood. And more importantly, help communities explore, reach consensus, and identify strategies to fight and eradicate these evil practices.



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The kit will also serve as a guide for users interested to facilitate and open discussion forums in order to reach agreement points; to minimize the risk and maximize effective ways of dealing with harmful traditions and cultures. The following mentioned practices are selected because they are commonly practiced in most parts of the country.

Part two: How to use this kit

The guide will help Parent Teacher Associations (PTAs) and Girls Education Advisory Committees (GEACs) to have general awareness about traditional practices that in some way or another affects girl's education. We hope these action groups will take the first step to enable communities, elders, teachers, students, and practitioners alert on mal practices of some cultural activities and based on the information they gather, enable the identified groups take actions swiftly.



PTAs and GEACs who will use this guide should read the first part, which describes harmful cultural/traditional practices that communities exercise. Subsequently, they will move to how they can facilitate organizing a dialogue forum within the community setting. The facilitation will be guided by several participatory techniques where PTA and GEAC can use based on each discussion type. Lastly, the kit will direct users to conclusive dialogues and indicate agreement points.

Part three: Facilitators guide

This part of the kit will give PTAs and GEACs highlights on how to address the issue of harmful traditional practices in their locality. The content of the guide is divided across several topics that broadly cover the following main issues:

- What is Gender Based Violence?
- What is Female Genital Cutting?
- What is Early Marriage and Abduction?
- What is sexual harassment?
- What is Sexual Harassment?

1. Frequently asked questions about Gender based violence and other traditional/cultural practices

In this section, GEAC and PTAs will have general knowledge about harmful cultural and traditional practices that exist in most regions of Ethiopia. This means they will be well informed on such issues to effectively organize and lead discussions.



The first step you should do is to review the following basic questions and possible answers. Select the lead facilitator from your group who will take the responsibility to conduct the briefing and Question and Answer session.

Q. What is Gender-Based Violence (GBV)?

A. GBV encompasses a range of acts of violence committed against females because they are females and against males because they are males, based on how a particular society values, assigns and views roles and expectations. It includes harmful traditional, cultural and discriminatory practices based on gender, sexual violence (rape), sexual harassment, emotional and psychological abuse, female genital cutting, early marriage, Abduction, intimate partner or spouse abuse (domestic violence), and sex trafficking. Below is a brief description on some of these practices.



Q. What is female genital cutting (FGC)?

A. Female genital cutting (FGC) is the collective name given to traditional practices that involve the partial or total cutting away of the female external genitalia or other injury to the female genitals, whether for cultural or other non-therapeutic reasons. Historically, it has been also called "female genital mutilation" or "female circumcision".

Q. When is FGC carried out?

A. The age at which FGC is performed on women and girls varies. It may be performed during infancy, childhood, and marriage or during a first pregnancy. FGC is typically performed on young girls, who are between 4 and 12 years old.

Q. Who performs FGC?

A. FGC is usually carried out by traditional practitioners or lay persons who use a variety of instruments, which range from a scalpel to a piece of glass, to conduct the procedure. Harsh, un-sterile conditions under which FGC occurs are not conducive to accurate, hygienic cutting.

Q. What are the consequences of FGC?

A. The potential physical complications resulting from the procedure are numerous. Because FGC is often carried out without anesthesia, an immediate effect of the procedure is pain. Short-term complications, such as severe bleeding, which can lead to shock or death, are greatly affected by the type of FGC performed, the degree of struggle

by the woman or girl, unsanitary operating conditions, and inexperienced practitioners or inadequate medical services once a complication occurs. There is a very high risk of infection, with documented reports of ulcers, scar tissue, and cysts. Female genital cutting may also interfere with a woman's pregnancy or labor. Other lasting effects that commonly result from FGC procedures include urine retention, resulting in repeated urinary infections and obstruction in menstrual flow, which may lead to frequent reproductive tract infections, infertility and chronic pelvic pain. FGC is also thought to facilitate the transmission of HIV through several mechanisms. Significant psychological and psychosexual consequences of FGC exist.



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Q. Why FGC still practiced?

A. In some cultures, the practice is based on love and the desire to protect because it is viewed as a culturally normal practice that has social significance for females. Some societies support FGC because they consider it a "good tradition" or a necessary rite of passage to womanhood. In many cultures, they practice FGC, a woman achieves recognition and economic security through marriage and child-bearing, and FGC is often a prerequisite for qualifying for wifhood. Other rationale for FGC include beliefs that FGC enhances male sexuality; curbs female sexual desire; has aesthetic, purifying or hygienic benefits; and prevents promiscuity and preserves virginity and that the clitoris is an unhealthy, unattractive and/or lethal organ.

Q. What is Early Marriage and Marriage by Abduction?

Early Marriage

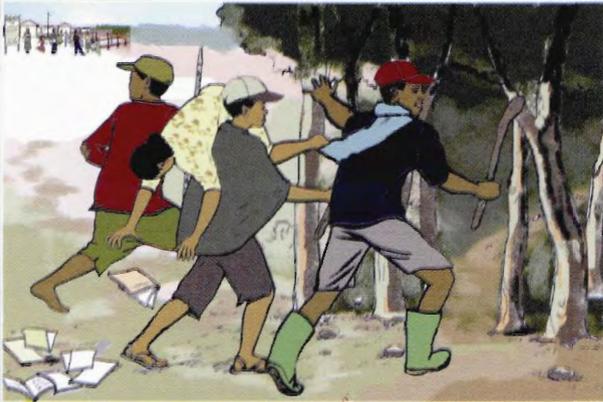
A. Early marriage and abduction rank high on the list of reasons for girls not going to school or for dropping formal education after puberty. Early marriage refers to any form of marriage that takes place before a child reached 18 years.



Marriage by Abduction

A. It is a serious problem in almost all ethnic groups of Ethiopia, even in those where other Harmful Traditional Practice, e.g. Early marriage, are low. Marriage by abduction can be carried out in a number of ways. In some cases, it is with the connivance of the girl's family or herself. In cases where the family has fore knowledge, the abduction might take place after the engagement process has been completed.

This kind of abduction occurs very rarely except in areas where disasters and economic hardships have obviated the usual bride-wealth arrangement.



In conditions where the girl is, in some way, party to the abduction (close to the elopement concept), the preparation and execution of abduction is less elaborate and the trauma for the girl less severe. The girl is aware of the impending action if not of the exact date and place. The risks of inter-family clashes and future feuds are reduced.

The “legitimization” of the subsequent marriage is also much easier. This of course does not necessarily mean that the first sexual intercourse will be blissful because, even if she has eloped: she is still supposed to resist the first advances. In the more usual situation where the girl and/or family are not party to the abduction, the process becomes more complex and hazardous.

What are the health risks of Early Marriage?

A. Early marriage often leads to early child-bearing, married girls are subjected to severe health complications associated with pregnancy and childbirth, such as obstructed labor or obstetric fistula. Underdeveloped physiology, combined with a lack of power, information, and access to services, means that young married girls experience much higher levels of maternal mortality and morbidity than do women who bear children when they are older. Studies have shown an association between teenage pregnancy, pregnancy-induced hypertension and anemia. And also fetal loss and abnormal deliveries

were higher among teen mothers. Children born to adolescent mothers compared to older mothers have low birth weight.

Why is Early Marriage and Marriage by Abduction still practiced?

A. Poverty is recognized as a major deciding factor for early marriage or marriage by abduction of girls especially in poorer households. Where girls are viewed as additional burden on family resources, they tend to be married off earlier as a family survival strategy. In vast majority of early marriages a girl's young age is perceived to be a desirable attribute for marriage, therefore, the older the girl, the less likely her chances for marriage. And in some parts of the country, early marriage is seen as a religious requirement to protect the sexuality of girls.

What does the Law say about marriage?

A. The 1987 Constitution was more gender sensitive and for the first time clearly postulated the equal status of women and men in their marriage relationships. It fixed the age of marriage for both at legal maturity, 18 years. The 1995 Constitution of the FDRE goes even further in ensuring gender equality.

Spouses have equal rights upon entering marriage, during marriage and in the dissolution of marriage. Marriage is by mutual consent and at majority. The Federal Revised Family Code 2000 has been promulgated. The regional ones are being discussed.

The challenge will be to implement the dictates of the constitution and the law even the relatively benign provisions of the 1960 Civil Code, which went against traditional practices were not respected. The principle in the previous Constitutions and Civil Code was that what has been explicitly provided for in the law overrides traditional/customary laws/practices. However, early marriage and marriage by abduction persist on traditional grounds though they have been explicitly dealt with in the Code. The 1995 Constitution contains a potentially explicitly dealt with in the Code. The 1995 Constitution contains a potentially problematic article in this connection. The article opens the possibility of adhering to "religious and customary laws, with the consent of the parties in dispute". This vexed issue has plagued legislation in multi-religion, multi-ethnic Ethiopia for years. Even though the 1960 Civil Code seemingly replaced religious and customary personal and family laws, Sharia law and courts continued to function on special order from the Emperor. Of course, customary laws continued unabated in remote and peripheral areas.

Q. What is sexual harassment?

A. It is an unwelcome sexual advance, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitutes sexual harassment when submission to or rejection of this conduct explicitly or implicitly affects an individual's life.



Q. How does sexual harassment take place? And what are some of the acts?

A. The harasser can be the victim's teacher, current or former student at school or older person out of school. In most cases, sexual harassment is manifested through sexual comments, gestures, jokes, or looks, being touched, grabbed, or pinched in a sexual way.

Moreover in schools spreading sexual rumors, clothing pulled at, off, or down in a sexual way or forced kissing is commonly seen. Some students also are being spied on while going to the latrines or changing cloths after sportive activities.

Q. What is the effect of sexual harassment?

A. Victims feel powerless to stop the situation. They often fear retaliation, for example with grades or recommendations. They fear that their complaints will not be taken seriously, or that they will be perceived as causing trouble. They often blame themselves, and fear that others will also blame them. Victims will have physical symptoms of stress, such as stomach problems or headaches. They can also become depressed, moody, or irritable without knowing why. They develop lower self-esteem, self-respect, and self-confidence.

The following describes the effect of sexual harassment on students. Not Wanting to Go to School, Not Wanting to Talk as Much in Class, Finding It Hard to Pay Attention in school, Staying Home from School or Cutting a Class, Making a Lower Grade, Finding It Hard to Study, and Thinking about Changing Schools etc.

The second step is to organize the discussion forum. But before going in to the discussion forum selected PTA and GEAC members should brief some selected community groups i.e. traditional leaders, practitioners, mothers, and students to pick one or two major problems in your vicinity.



Q. How can a community make a thorough assessment about GBV?

A. Situation analysis i.e.

- The demographic composition (age and sex) of the population;
- The social and cultural norms for gender expectations, use of power, and decision making in the community;

- The family and community systems for protection that were in place before, and are in place now;
- The groups and individuals at risk of GBV; the extent and types of GBV that occur; and community attitudes and beliefs about GBV, including how the community defines GBV;
- The knowledge, attitudes, and behavior of people in positions of power in the community;
- The physical environment, site layout, and access to services and facilities;
- The formal and informal systems for law and administration of justice.

Q. How can a community respond to GBV?

A. 1. Community education- local government authorities working on protection and rights awareness should create strong linkage with social structures such as churches, schools etc. to educate and sensitize communities. Further, identify families who have abandoned the harmful practices, to encourage communities learn from them and consider the options.

A. 2. Counseling (i.e. short-term listening and emotional support) for survivors and families

A. 3. Advocacy and assistance for survivors with health care, security and legal justice systems, and other needed services

A. 4. Group activities including income generation and micro credit projects, for harmful traditional and cultural practitioners, abused survivors and other vulnerable students that focus on building support networks, reintegration into communities, confidence building, skill building, and promotion of economic empowerment

Note: the above highlights will provide the user to come to an agreement while facilitating issues concerning GBV in schools and the surrounding environment. Users should take cautions while giving out this brief introduction to community members since most of the explanations should take in to consideration that this is not to indict the tradition of the society but rather to question the consequence and outcome of the act. Below you will find some common traditional practices exercised in your local setting.

The third step will be to thoroughly follow the following methods to organize community friendly discussion forums.

2. Organize family friendly healthy discussions

While organizing such kind of family friendly healthy discussion forums, facilitator's (PTAs and GEACs) should think about organizing participatory discussions since participants will be able to relate to their own situation, or questioning and disagreeing with it.



Method No. 1 Debates: This method is useful when there are strongly held and differing views among participants on a given topic. Facilitators should review their groups and divide them in to two big groups. Then follow the steps:

Step one: The facilitator usually provides a stimulus statement or question and asks participants to argue the case or answer the question from differing standpoints. E.g. If the forum is gathered to discuss about the problem of early marriage and abduction in the locality, the kind of debate that facilitators should initiate is first by asking the participants if the problem really exists and its effect in female students performance.

Step two: Time is usually allowed for the different groups to develop their “case”. Selecting one spokesperson, their case will be reported to the other group. Then there is a plenary session where the cases or arguments are debated.

Step three: At the end of the debate, participants are often asked to indicate whether they have changed their position as a result of the debate. E.g. the debate should be concluded with agreement points and way forward actions. The community may suggest minimizing the prevalence of early marriage by protecting their children while they go to school or teaching youth, allow girl students to continue school after marriage etc.

Method No 2 SWOC Analysis: SWOC stands for Strengths, Weaknesses, Opportunities, and Constraints - these four headings providing a structured way of reviewing any situation or event. If your group is very large, this method might be a possible solution to brainstorm on any issue that you select.

By way of example if we consider the question “How do we stop abduction?” this may generate the following questions.

Step one: Strengths, Assess what are we good at doing? What have we gained? Where are we confident? E.g. ask the school community actions taken previously in the school when similar situation happened. Make a record of the event with regards to successful accomplishments, and actions you are confident to take on similar events.

Step two: Weaknesses, Where are we vulnerable? What else do we need to do or learn? While you conduct, your actions against sexual harassment ask your group what problems you have faced, an obstacle that you were unable to tackle. For example, the school might have faced a problem in convincing boy students to stop bullying on girl students and any kind of words that will traumatize girl students.

Record your weakness and also what measures were taken to minimize occurring problems. The school may probably go to parents of the boys who are bullying and parents may have taken action to reduce the problem.

Step three: Opportunities how will we now use what we have learned, gained, or done in the future?

Can other community members or counterparts benefit from what we have learned? In this section, the group is required to come up with possible action plans to perform in the near future and how this can be networked with other neighboring community members. This can include, define sexual harassment in our school, confidence building counseling to harassed children, parents awareness sessions, peer group discussions etc.

Step four: Constraints, What might undermine this process? What support is required to make sure our plans happen? This part will highlight our projection of obstacles while putting actions in the ground. Sexual harassment in the school is a challenging topic for most harassed students. Students don't talk about it, either they deny or never speak to any one about their problem. There is ignorance from teacher's side and fear from student's side. In this regard, point out your projected challenges and indicate the support you need from an individual, group or etc.

N.B. Participants will deal with the above exemplary question in a small group and they can complete each section with their ideas. The finished versions can then be displayed, compared, and discussed.

Before concluding this piece here are some tips which will help PTAs and GEAC to undertake advocacy on such types of friendly discussions.

1. Verify that such activities are offered at hours convenient to families, after working hours etc. GEAC and PTAs can cluster themselves according to their vicinity and program and offer such type of advocacy technique on a regular basis
2. Lobby for a range of family support services
3. Distribute small resource guides for community resources and services. For e.g. leaflets about abduction, early marriage, FGM etc.
4. Conduct family feedback forum about cultural/ traditional practices that has health implication.

3. Perception awareness dialogues

Although most communities have considerable collective understanding of cultural practices, its risk and how to deal with them, some are not aware of the safety issues that it involves. Others may be aware of the risks but feel there is little they can do; they lack awareness the possibility that risks and/or vulnerability can be reduced, or may simply lack the means to change the situation and may have no alternative.

The simple method to address the above mentioned concern is calling meetings for specific groups, or selected individuals may be brought together for focus group discussions on specific topics, and individual families may also be visited. The influence of existing local groups or social organizations can be very useful in increasing the impact of the information. Below there are two-perception awareness dialogue questions to probe to community members and other interested groups.

N.B. Remember you can choose any other topic as per to the need

Topic No 1: How can people practice cultural and traditional exercises safely or how their impact can be reduced?

In this very broad topic, facilitators can suggest the following ideas after listening to the thoughts of communities.

- Sensitization of youth, religious leaders and authorities to put pressure on the people who perform the practice.
- Provision of training to the public about the functions of the female external genital organs.

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