

Chapter 3

What Has Become of FGC After Strict Eradication Campaigns?: Female Genital Cutting and Its Eradication Activities Among the Yellow Bull in Ethiopia



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3.1 Introduction

Female genital cutting (FGC) refers to various controversial practices involving modifications of female genitalia. Cultural anthropologists have identified this practice as “female circumcision,” and many regard it as a rite of passage, the function of which is to protect women’s chastity and maintain the integrity of patrilineal lineages (Hayes 1974). Activists concerned with abolishing this practice regard it as a tool of men’s domination over women’s sexuality and call it “female genital mutilation” (FGM). This term implies that the practice irreparably damages women’s bodies. They have also criticized the anthropologists who describe FGC as a rite of passage, accusing them of participation in covering up patriarchal rule (cf. Hosken 1993). This argument has developed into a controversy between relativism and universalism among scholars and activists.

While scholars and activists have argued over their ethical stances on FGC, international organizations such as the WHO and UNICEF have pushed for FGC abolition since the late 1970s. At first these UN organizations regarded FGC as a health issue for women. However, in the 1990s, the UN changed its stance and defined FGC as a “human rights violation” against women.¹ The WHO and UNICEF declared a

¹ In 2003, the Inter-African Committee on Traditional Practices (IAC) declared a policy on FGC of “zero tolerance”. Recognition of this trend led UN organizations to change their policy and reclassify FGC from a “health problem” to a “human rights violation” (Boyle 2002; Shell-Duncan 2008).

This is a revised version of my paper, entitled How Did the Discourses of Globalized Eradication Campaign Reach Grassroots Communities? Female Genital Cutting and Its Eradication Activities among the Yellow Bull in Ethiopia in *Sophia Journal of Asian, African, and Middle Eastern Studies* 36, 2018.

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K. Nakamura et al. (eds.), *Female Genital Mutilation/Cutting*,
https://doi.org/10.1007/978-981-19-6723-8_3

policy on FGC of “zero tolerance,” including “medicalized” FGC, and called for its abolition in African states where it was practiced. Between the late 1990s and 2010, various African states criminalized FGC (Boyle 2002).

The abolition of FGC may have been intended to empower women and to improve the social conditions in which they live. However, the WHO policy seems to have suffered from difficulties and contradictions. The practices defined as FGM by the WHO range widely, from pricking genitalia to infibulation, and from cutting genitalia without any anesthesia by traditional circumcisers, to excision with anesthesia in sanitary medical facilities. It is unlikely that these different types of FGCs cause similar health problems.

The human rights discourse, which asserts that FGC is practiced to oppress women in patriarchal societies, does not readily fit all the cases that are called “FGM.” In most societies where FGC is practiced, it is done by women, many of whom willingly perform the procedure. Thus it is oversimplifying to suggest that FGC is done to oppress women. In many societies, FGC is commonly practiced with culture-based consent so it is unreasonable to compare it to torture, which is inflicted on unwilling victims. FGC is said to violate the rights of children who are made to undergo this practice by their parents. However, in many societies, parents have their children undergo this practice out of concern for their children’s welfare.² If the problem is considered to be the patriarchal character of the culture and social system of which FGC is a part, it is difficult to distinguish it from genital cosmetic surgery, which is done to enhance sex appeal in Western societies. The WHO tries to ban all types of FGC, including the cutting of the prepuce of the clitoris, yet they justify their tolerance for male circumcision on the pretext that it protects against HIV, although the validity of this claim is still in dispute (cf. Shell-Duncan 2008).

According to a recent UNICEF report, the rate of FGC in Africa is declining (UNICEF 2020). However, the process of abolition is not straightforward. Ideas of abolition have been modified and interpreted differently according to the local setting. For example, in one community in Mali, FGM was abolished, not because awareness of human rights and women’s health had spread among inhabitants, but because local leaders wanted to display their political hegemony through running an NGO for FGM abolishment, and circumcisers had accepted the economic compensation given to them. Although the ideas appeared to have been accepted, they have been distorted and have not reached the local communities (cf. Gosselin 2000). When the ban was enforced, FGC may well have been practiced illegally (Boyden 2012; Pells and Robinson 2014). If those who enforce the ban are not supported by the inhabitants, the inhabitants may well show open resistance (cf. Thomas 2003). The enforcement of “zero tolerance” seems to have caused much confusion.

In this chapter, I examine what the strict banning of FGC brought about when it reached a grassroots community, and how stakeholders negotiated with each other over their “culture” according to their social position. I focus on one agro-pastoral

² Although FGC is often said to be done on small children, in some societies girls over the age of 15 undergo FGC (Central Statistical Agency 2017: 322). Girls of the Yellow Bull, to whom I refer in this chapter, undergo FGC at the age of approximately 20.

society in Ethiopia, which I call the Yellow Bull, where FGC continues despite strong pressure from the local government to abolish it. Why do people continue FGC? How do stakeholders see FGC? How has political power been wielded during negotiations? I attempt to answer these questions by describing the cultural background of the Yellow Bull and the practice of FGC abolition among them.

3.2 FGC in Ethiopia

3.2.1 *General View of FGC in Ethiopia*

Before investigating the case of the Yellow Bull, I review the overall situation concerning FGC in Ethiopia. Although FGC has been banned by criminal law, it is still prevalent in Ethiopia. According to UNICEF, 65% of women in Ethiopia have undergone FGC (UNICEF 2020). The type of FGC, percentage of women who have had FGC, and age at which the procedure is performed, vary according to area and ethnic group. The percentage of women³ who have undergone FGC among those aged 15–49 is higher in the east of the country. The regions with the highest prevalence are Somali, at 98.5%, and then Afar, at 91.2%. The regions with moderate prevalence are Oromia at 75.6% and Amhara at 61.7%. The lowest prevalence is in Tigray, at 24.2%. In western and southwestern Ethiopia, there is a mosaic of ethnic groups in which those who practice this custom and those who do not are mingled (Central Statistical Agency 2017).

The type of FGC varies according to ethnicity. Somali and Afar mostly practice infibulation, the Amhara practice clitoridectomy, and for the Oromo excision is common. The age at which girls typically undergo FGC also differs. Among Afar, Amhara, and Tigray, cutting is done from one to two weeks after birth, while for the Somali the practice typically occurs at approximately eight years. Some of the Oromo groups practice it before marriage (UNICEF 2020). Overall, the practice of FGC has been declining this decade, but at a rate that differs according to ethnic group. Among the Tigray, FGC has been disappearing rapidly, but among Somali and Afar, it is still widely practiced.

Studies on FGC in Ethiopia until the 1990s were relatively few compared to those in other African countries. However, some substantial researches have been conducted since the 2000s. Though lacking detailed ethnographic information on communities, since most of them are quantitative, the existing studies do show some general tendencies concerning FGC practice.

³ The estimated rates of prevalence of FGC in Ethiopia vary according to researchers. Robera et al. (2020) estimates prevalence of FGC in Ethiopia as 77.28% based on meta-analysis of 19 studies carried out in Ethiopia between 2001 and 2017.

3.2.2 FGC in Ethiopia Based on DHS

Some studies concerning FGC were conducted using data collected by the DHS (Demographic and Health Survey) in 2016 and 2005 in Ethiopia.

According to a study by Ayenew et al. (2021) based on DHS 2016, prevalence of FGC in Ethiopia is 66.9%. The respondents who were in the age group of 20–34 and 34–49 were more likely to be circumcised as compared to the age group of 15–19. Religion was an important factor for FGC. Being a Muslim, rather than an Orthodox Christian, increased the odds of circumcision by 2.17 times. Residence was another important factor. Women living in rural areas were 2.12 times more likely to have had FGC as compared to those living in urban areas. Having a primary-educated husband decreased the likelihood of FGC by 49% as compared to having a husband with no education. Wealth index was another variable that was negatively associated with female genital cutting. Women of the middle and rich wealth index category were 44–45% less likely to have had FGC compared to poor women.

Dawit et al. (2021) showed the attitude towards FGC among Ethiopian women based on DHS 2016 with multiple logistic regression analysis. Their research indicated that women with at least a secondary education were above four times more likely to agree with the termination of the practice. On the contrary, women who were circumcised, had Muslim faith, no formal education, or were poor, were less likely to support the discontinuation of FGC.

The study conducted by Zenebe (2010), which used the database of DHS 2005, and analyzed the attitude toward FGC of 12,689 women aged 15–49, showed similar results. He added that those aware of the need to avoid HIV were 0.6 times less likely to support the continuation of FGM compared to their counterparts.

3.2.3 FGC in Amhara Region

3.2.3.1 DHS Data Analysis⁴

The DHS data from 2005 were used to analyze the FGC status of 1942 women aged 15–49 years who resided in the Amhara region (Rahlenbeck and Wubegzier 2009). The majority of those women (68.6%) replied that they had undergone FGC, and the rate declined from 77% in women aged 45–59, to 59% in those aged 15–24 years. Half of the respondents (54%) disapproved of the continuation of FGC. Of particular interest is that the researchers measured the difference in the respondents' opinions on the continuation of FGC through a score on self-empowerment as well as degree of education. The self-empowerment score was assessed through sets of questions measuring the degree to which a woman is able to make decisions on her own sexuality and her response to domestic violence inflicted by her husband.

⁴ Analysis on FGM in regional populations based on DHS 2016 had not been found till the end of 2021 when this chapter was written.

Respondents who scored high on empowerment indices had a 1.5 times increase in the odds of favoring discontinuation compared to women who scored low. Women who had attended school had a four times increase in the odds of disapproving of the practice compared to those who never did.

3.2.3.2 East Gojjam

Andalem (2013) conducted research in the East Gojjam zone in the Amhara region in 2013 on 730 women aged 15–49 years who had daughters less than five years old. Most women were Amhara and Orthodox Christians. Most of the respondents (77.7%) had undergone FGC, and 62.7% of their daughters had been circumcised. Most of the circumcised daughters (95.9%) had been circumcised under one year of age. Most were circumcised by traditional circumcisers. More than half of the respondents (61.5%) supported the continuation of FGC. The reasons for continuation were, “tradition/custom,” “to give birth,” “to increase happiness during sex,” “to increase community’s acceptance,” “to get husband easily” among others.

Women’s age, educational level, previous circumcision, and health education were significantly associated with FGC practice. Women in the 18–24 age range were less likely to have undergone FGC compared to those in the 34–49 range. Women who had not attended school were 5.43 times more likely to have undergone FGC than those who had formal education. Respondents who had undergone FGC were 3.45 times more likely to circumcise their daughters compared to those who had not undergone FGC.

3.2.4 *FGC in Harari Region*

This research was carried out in the city of Harar in Harari region on women of the Adere, the Oromo, and the Amhara, who inhabited the city (Missailidis and Gebre-Medhin 2000). Eight women from each group (24 total) were interviewed. They were aged between 20 and 60 years.

The women of all groups believed that the reason they practiced FGC was to reduce and control female sexuality. They considered virginity to be a prerequisite for marriage and believed it was impossible to maintain virginity and chastity without FGC. The Muslim Adere and the Oromo regarded FGC as an act of religious importance, and the Christian Amhara saw it as a cultural custom. The Adere and Oromo practiced infibulation on four-year-olds to puberty, and the Amhara practiced excision on the eighth day of birth.

Although FGC was prevalent in this area, Muslim leaders had already participated in anti-FGM campaigns, and infibulation had been declining. People became free to marry a person of their own choice, thus FGC became less important for marital reasons.

3.2.5 *FGC in Somali Region*

3.2.5.1 **Somali Refugees in Somali Region**

Getnet and Wakgari (2009) carried out research in three refugee camps in the Somali region on 492 refugees, 246 Somali women and 246 Somali men in 2004. The researchers investigated not only the FGC status of interviewees but also that of their female children aged 1–12 years. They also interviewed circumcisers.

Almost half (42.4%) of their female children had undergone FGC. However, as they got older, the rate of the children having been circumcised increased, and 98% of them had undergone FGC among children aged 11–12. The researchers inferred that Somali girls generally undergo FGC at the age of 7–8 years. The most prevalent type of FGC was clitoridectomy (63.9%), and this form was more common in younger girls.

The operation was performed using traditional female circumcisers. The average age of the circumcisers was 45 years, and 73% of them were illiterate. The forms of FGC practiced by them included clitoral cutting (11.5%), vaginal stitching (42.3%), and clitoral cutting and stitching (46.2%). However, most of them (96.2%) replied, at the time of the interview, that they preferred to perform milder clitoral cutting.

Most of the parents replied that they intended to have their children undergo FGC, and the intention among the women to circumcise the girls was higher (91.1%) than that reported by men (75.2%).

The results of logistic regression showed that the practice of FGC was significantly associated with the age of the parents and their involvement in anti-FGM interventions. The practice of FGC was more common among younger parents, and less among parents who had participated in one of the anti-FGM activities. The practice of FGC was widespread among Somali refugees, and there was considerable support for the continuation of the practice. However, the form of FGC has been changing to milder clitoral cutting. Anti-FGM intervention was negatively associated with the practice and the intention to circumcise daughters.

3.2.5.2 **Jijiga City**

Muktar et al. (2013) conducted research in 2012 in Jijiga, the capital city of the Somali region, involving 323 women aged 15–49 years. Most of them were Somali (71%) and Muslims (84%). Since they inhabited the city, most of them were well-educated. Of these, 41.5% had finished 12th grade.⁵

Most respondents (90%) had undergone FGC, and the age of their circumcision was between 6–14 years. Infibulation is the most common form of FGC. Mothers (67.4%) trained traditional birth attendants (53%), and village women (47%) were decision makers for this practice.

⁵ In Ethiopia, primary education is offered for eight years and is compulsory between ages 7 and 12. Four years of secondary education, comprising two two-year cycles, follow.

Most respondents (91.3%) had heard about the ill effects of FGC, and 29.5% of them had received information about the harmful effects of the practice from radio and TV. More than half of them (63.4%) did not support the continuation of FGC, but 67% of them wanted to have their daughters undergo FGM. Among those who wanted exposure of their daughters to FGC, however, most (83%) wanted to have them undergo FGC in the mildest form (cutting prepuce).

The reasons for practicing FGC were “tradition” (85%), “religious requirement” (47%), “to protect virginity” (76%), “to be accepted bride” (85%), “to decrease sexual drive” (55.2%) and “to be admitted into women’s group” (55.2%).

In this area, there was a trend away from the severe form (infibulation) to a milder form (cutting prepuce). Though most of the respondents had a negative attitude toward FGC, they wanted FGC to continue and to be practiced on their daughters. The researchers inferred that this inconsistency was due to inadequate knowledge about reproductive health among the women involved in this study.

3.2.6 Oromia Region

3.2.6.1 East Hararge

This research was conducted in the East Hararge zone in the Oromia region in 2008 on 848 women aged 15–49 years (Wondimu et al. 2012). Most of them were Oromos (96%), Muslims (95%), and illiterate (84%).

Most of the respondents (92.3%) replied that they had undergone FGC, had experienced difficulty in delivery (41.3%) and in their first sexual intercourse (30.6%); 38.5% replied that FGC continued. The types of FGC claimed to be practiced in this area were clitoridectomy (78.9%), cutting of clitoris and labia (35.2%), clitoris, labia, and surrounding parts (23.5%), cutting of clitoris, labia, surrounding part, and stitching (10.4%).

The reasons given for practicing FGC were to reduce “female hyperactivity” in sexual practice (60.3%) and to prevent females from early initiation into sex before marriage (25.1%). The results of logistic regression analysis showed that women living in rural areas were less likely to be circumcised than women living in urban areas. The ownership of a radio, indicating a higher socio-economic status, seemed to be associated with a lower risk of women or their daughters being circumcised.

3.2.6.2 Bale

Daniel et al. (2015) conducted research in 2014 at the Bale zone in the Oromia region on 634 women aged 15–49 years. Most of them were Oromo (83%), and 13% were Amhara. More than half (59%) were Muslims, 37% were Orthodox Christians, and 4% were Protestants. The majority (73%) supported the discontinuation of FGC. The reasons for performing FGC were “religious requirement,” “safeguarding virginity,” and “maintaining culture.”

Factors associated with the intention to continue FGC were place of residence, educational level, and circumcision status. The odds of intention to continue FGM were about six times higher among rural residents compared to their urban counterparts. Those who were illiterate were about eight times more likely to continue FGC than those who attended secondary level education and above. Circumcised respondents were nearly three times more likely to intend supporting a continuation of FGC than uncircumcised respondents.

3.2.7 FGC in Transition

Quantitative studies conducted since the 2000s show that FGC in Ethiopia is in transition. Some studies report that the number of women who have undergone FGC is declining (Rahlenbeck and Wubegzier 2009; Abebe et al. 2009), while others report that the type of FGC has changed to milder forms such as clitoridectomy or cutting prepuce (Missailidis and Gebre-Medhin 2000; Getnet and Wakgari 2009; Muktar et al. 2013). Most studies emphasize that many women support discontinuation of FGC (Abebe et al. 2009; Muktar et al. 2013; Daniel et al. 2015).

The factors that are considered to affect the attitude toward FGC are age, education level, experience of FGC (Rahlenbeck and Wubegzier 2009; Andalem 2013; Daniel et al. 2015), and location of residence (Abebe et al. 2009; Wondimu et al. 2012; Daniel et al. 2015). Some studies indicate that anti-FGM campaigns affect women's attitudes (Missailidis and Gebre-Medhin 2000; Zenebe 2010; Andalem 2013; Daniel et al. 2015).

Although these studies indicate some general tendencies concerning FGC in Ethiopia, how local inhabitants in grassroots communities have interpreted anti-FGM campaigns, reconsidered the meaning of their customs, and reacted to those campaigns have not been described. In the next section, I will show how those campaigns reached grassroots society by examining the case of FGC abolition in the Yellow Bull based on a detailed ethnographic survey.

3.3 Forced Abolition and Resistance of Women: FGC Among the Yellow Bull

3.3.1 Historical Background of the Yellow Bull

The Yellow Bull are agro-pastoralists who live in the peripheral district of Ethiopia.⁶ Their preferred type of FGC has shifted in the last decade from excision (type II) to

⁶ Yellow Bull is a pseudonym which refers to one ethnic group in Ethiopia. I use the pseudonym so as not to jeopardize the personal lives of my informants due to the contents of this chapter.

clitoridectomy (type I). An NGO that carried out a development project in 2006 tried to persuade them to abolish FGC, then the local government banned it. The Yellow Bull declared that they had stopped FGC and held a big ceremony celebrating its abandonment. However, they continued practicing it. They persistently resisted the local government's strict enforcement of the FGC ban. The case of the Yellow Bull shows what happens when the abolition process is enforced without regard for local conditions. Before examining the process of FGC abolition, I will briefly discuss the social and historical background of the Yellow Bull.

The Yellow Bull depend on flood retreat cultivation and livestock herding. Their society consists of two territorial sections, with each section consisting of two regional groups, each with its own chief and age organization.⁷ The elders of the age organizations wield considerable power, and play an important role in the administration of regional groups, such as distributing flood plains, arranging marriages, and reconciling warring ethnic groups.

Although the Yellow Bull lived as an independent agro-pastoral group until the end of the nineteenth century, the invasion of the Ethiopian empire destroyed their autonomy. Since then, they have been ruled by the Ethiopian state. Under the Ethiopian Empire, the mediators, known as *chika shum*, mediated between the empire and the local people, and wielded power over the inhabitants. The mediators imitated the culture of the highlanders. The Yellow Bull felt antipathy toward the ruling highlanders and tried to maintain their ethnic identity by preserving their traditions.

After the empire was dismantled by the Derg military junta in 1974, peasant associations were organized in rural societies. The Yellow Bull, too, were organized into a peasant association, and some of their men began to participate in local administrative politics. After the Ethiopian People's Revolutionary Democratic Front (EPRDF) purged the Derg in 1991, and Ethiopia became a federal state based on ethnicity, local administrative offices were occupied by staff that came from the dominant ethnic groups of the area. Some young, educated, Yellow Bull men entered office. However, most of the uneducated Yellow Bull disliked them, since they considered the officials to be similar to the "disgusting" highlanders.

Resistance against the rule of the Ethiopian state by maintaining patriarchal traditions has thus formed the cornerstone of the Yellow Bull culture. Their resistance to the abolition of FGC should be understood in this historical context.

⁷ The age organization is the most important social arrangement of the Yellow Bull. They organize age sets for every eight years, and boys and girls of each territorial section enter a new age set after they reach puberty. They have their own leaders in their age set, and form strong ties among their peers.

3.3.2 FGC of the Yellow Bull

In their language, the Yellow Bull refer to FGC as “tying knees.” Women who have undergone FGC have their knees tied together until their scars heal. Women of the Yellow Bull marry at the age of approximately 20. The marriage ceremony continues for five days, and FGC is performed on the last day of the ceremony.

On the morning of the day, women who have married into the lineage of the bride gather in the bride’s house to join the procedure. The circumcisers of the Yellow Bull are female, and they are said to have special circumcision skills. In the evening, at home, the bride takes off her clothes and sits astride a long wooden tub made of a log which has been cut in half and hollowed out. The circumciser cuts the bride’s external genitalia with a small knife. Until the first years of the twenty-first century, they cut all parts of the external genitalia. At that time, the women who participated in the ceremony watched the procedure to check that all parts of the external genitalia were removed. Starting around 2010, however, the type of FGC practiced gradually shifted to clitoridectomy. After cutting, the bride, wrapped in a sheet of white cloth, is laid on a cowhide.

When a circumcision is performed, the groom comes to the house. He wears special ornaments typically worn by the killer of an enemy. The brothers of the bride demand that the groom provides nulliparous cows as bridewealth. With these cows, the bride is said to “be bought” by the groom.

After the negotiation of bridewealth, friends of the groom bring the bride, who has undergone FGC, to the groom’s house. She drinks a cup of liquid, called “poison” in their language, and becomes a member of the groom’s family. She has her knees tied and stays there to heal the wound by exposing it to smoke from burning wood. After several months, the married couple build a new house and are acknowledged as an independent household. They have the right to plot on a flood plain which is assigned by the elders of the settlement.

3.3.3 Patriarchy and the Politics of Interpretation: Ritual Meanings of FGC Among the Yellow Bull

3.3.3.1 Transition of Women’s Status

When asked why they undergo FGC, the Yellow Bull most commonly answer that it is their tradition and that it makes girls clean and turns them into adult women. If a woman has not undergone FGC, her child is considered to be polluted, and the child cannot enter their age organization. The child and her/his mother would then be expelled from the Yellow Bull into neighboring ethnic groups.

The reason children of women who have not undergone FGC are considered “polluted” is that the Yellow Bull associates FGC with the transition of the status

of a woman through marriage. Through FGC, a woman's belonging is considered to change from her father's clan to her husband's clan.

The transition of a woman's belonging is very important for both the woman and her husband. The most important priority for men of the Yellow Bull is to have offspring and having male children, in particular, is regarded as very important. If men have male children, they have heirs to the cattle they inherited from their fathers. If men marry, they gain a woman who will give birth to their offspring, and for the woman to undergo FGC means that the children she gives birth to are his descendants, even if they are not the biological father. A woman who gives birth to a child but who has not undergone FGC does not belong to the clan of the man who would be her spouse, and consequently, the child does not belong to any clan. Thus, the child is regarded as polluted and expelled from the Yellow Bull.

The Yellow Bull members explain the meaning of FGC as the transition of a woman's status in several ways. One of the elders explained it as follows: "It is that the husband owns his wife's ghost." Significantly, when she dies, she is buried in the cemetery of her husband's clan. Her belonging changes irreversibly. One of the women said that FGC was like cutting the ears of cattle. The men of the Yellow Bull own many cattle, and as a mark of ownership, each man makes his own specific cutting-mark cut on both ears of his cattle. These accounts emphasize how FGC marks the irreversible transition of a woman's belonging.

FGC is also important for women. For a woman to marry, she becomes an adult. Through the generation set of her husband, she is incorporated into the generation system of the Yellow Bull.⁸ If she occupies a higher position in the generation system, she can wield strong power by presiding over the marriage ceremonies of the settlement.

3.3.3.2 Ethnic Identity and FGC

For women of the Yellow Bull, FGC is considered not only a sign of adulthood but also a mark of their ethnic identity. There are four ethnic groups living in the areas adjacent to the Yellow Bull. Of these, the Yellow Bull intermarry with only two ethnic groups. These groups practice FGC. The Yellow Bull considers the cattle and women of these groups to be fertile. However, the Yellow Bull avoid marrying into the other two ethnic groups who do not practice FGC. The Yellow Bull say that if their men own those groups' cattle, drought will result. Likewise, they say that if their men marry those groups' women, infertility will result.

Such beliefs are also reflected in the women's view of their ethnic identities. Women of the Yellow Bull deride those whose genitals are considered insufficiently

⁸ The generation system, which is different from the age organization, is another important organization to which all the Yellow Bull belong. A Yellow Bull enters a generation set (which is different from that of age organization) below the generation set of his or her father. The members of the higher generation sets play an important role in the rituals of marriage. Since marriage is the foundation of the Yellow Bull's kinship system, those who belong to the upper generation sets are considered to have strong power.

cut, saying they are like women of those groups who do not practice FGC. Women of those groups are said to have infertile “hot blood,” unlike women of the Yellow Bull, who have undergone FGC and are considered fertile. This contrast gives Yellow Bull women pride in their ethnicity and constitutes part of their ethnic identity.

3.3.3.3 Death and Rebirth, Murder and Plunder

The meaning of FGC as a mark of the transition of women’s status is known to all the Yellow Bull. However, the following interpretation of FGC was mentioned only by the elders who were familiar with some special rituals. According to them, for a bride to undergo FGC in her parents’ house represents her death. After FGC, she is wrapped with a sheet of white cloth, which is also used to wrap the body of the dead at a funeral. Then, the bride is brought to the groom’s house and drinks a cup of liquid called “poison.” Significantly, a newborn male baby is also fed this liquid; with this ritual, the baby is regarded as belonging to the clan where he was born. Thus, for a bride to drink this liquid after she has entered the groom’s house suggests that she is reborn there and now belongs to the groom’s clan.

This symbolism recalls another ritual practiced by the community. The Yellow Bull believe that killing enemies belonging to certain ethnic groups brings fertility to the killers. Through the blood of killed enemies, the killer is blessed with a good harvest, plenty of milk from his cattle, many children, and a long life. However, if he wants to have the power of fertility, he must behave according to certain regulations and carry out specific rituals. First, he must ask a friend who accompanies him on the battlefield to cut off and bring the penis of a dead enemy. Then he must “buy” that organ from his friend in exchange for calves. In his settlement, the killer wears special ornaments and demonstrates that he has killed the enemy.

In the settlement, a third person can “buy” the power of fertility from the killer in exchange for calves, through a ritual called “putting on the ornaments.” In this ritual, the man who wants to “buy” the power of fertility behaves as if he were a killer, and the killer behaves as if he were an enemy about to be killed. The man then snatches the penis of the killed enemy from the killer.

The elders say that these rituals and marriage rituals have common features. Firstly, the leading actor in both rituals wears a “special ornament of the killer.” At the marriage ritual, the groom wears “special ornaments” when he comes to the bride’s house after she has had her genitalia cut. This suggests that FGC is enacted as a symbolic murder. The bride is killed like an enemy by the groom. Secondly, the object of exchange is “bought” with calves. During the ritual of killing, the penis of the killed enemy is “bought,” just as in the ritual of marriage, the bride who has undergone FGC is “bought.”

Thirdly, in both rituals, buyers and sellers have similar relationships. After marriage, the groom and the brothers of the bride enter a special relationship, and the members of their lineages cannot intermarry until their grandchildren’s generation. Similarly, the killer of the enemy and his friend—the one who bought the penis—enter a special relationship, and the members of their lineages are prohibited from

intermarriage forever. Referring to these similarities, the elders agree that marriage and killing enemies have common characteristics.

The concepts underpinning these rituals of marriage and killing enemies, seem to show how the patriarchy of the Yellow Bull has been established. It gives men the active role of gaining and exchanging the object (the bride or the blood of the enemy) that has the power of fertility, and which comes from outside their locality (their clan or ethnic group). It assigns to women the passive role of being acquired and exchanged. It asserts that even the fertility of women is ensured and enhanced by men. In this regard, FGC is not only a mark of the transition of a woman's status, but a ritual that emphasizes women's subordinate gender identity, in which they come of age by being symbolically killed and exchanged by men.

Thus, for the Yellow Bull, the FGC has multi-layered meanings. Abolitionists like the WHO believe that FGC is based solely on the patriarchal oppression of women. The multi-layered meanings of the FGC of the Yellow Bull seem to square with this assertion. How, then, do women of the Yellow Bull themselves regard FGC and its relation to patriarchal oppression?

3.3.4 Interpretation of FGC and Resistance of Women

3.3.4.1 Patriarchy and Resistance of Women

Women of the Yellow Bull say that FGC is an important tradition that has been handed down from their grandmothers. Since FGC is painful, they are nervous before the procedure. However, after FGC, they feel proud to become an adult woman of the Yellow Bull and feel they can establish themselves in their community.

From a feminist point of view, this system, in which women belong to the kinship of their husbands through marital exchange, and engage in the reproduction of their community, is typically patriarchal (Rubin 1975). Women's gender identity is molded in such a system, and it functions as a part of it, meaning that FGC is embedded in patriarchy as a symbol of women's subordinate status. If this is true, then the women of the Yellow Bull are "prisoners of convention" who are imprinted with a false consciousness to preserve male domination.

If they are "prisoners of convention" who uncritically accept a male-dominated social system, then they would be subordinate to men in all the situations of their everyday life. However, the way they cope with male dominance in everyday life is much more complex. Women of the Yellow Bull have resisted male dominance in many ways. They frequently outwit the husbands whom they were forced to marry and meet their former lovers with the help of their female friends. Recently, girls have often resisted forced marriage by soliciting intervention by police stationed in a nearby town.

Resistance sometimes becomes more systematic. One example is spirit possession. The notion of spirit possession began in the Yellow Bull in the 1960s and rapidly spread among them. Those who were "possessed" by spirits organized cults

that imitated the age organization of the Yellow Bull. The dominant members of those cults wielded power almost equivalent to that of the elders of the traditional age organization. Most of the cult members were women. They were able to gain freedom for their activities on the pretext of participating in a *séance*. When they had any trouble with their husbands, they even took power from their husbands in their households in cooperation with the members of their cults.

Another case is the Women's Association. The association was organized in the mid-1990s, when the money economy gradually spread among the Yellow Bull. Their customs prohibited women from owning livestock, which is the most important property. Women needed to ask their husbands for permission to sell small livestock in the weekly market to earn money, which was necessary, for instance, to bring sick children to the nearby clinic. By utilizing the NGO's micro-finance project, the women who joined the association bought commodities such as salt and coffee at cheaper prices from the merchants outside the Yellow Bull and sold them at a weekly market. The members were able to earn profits through sales. Men criticized the association at first, saying that women should not own property. However, they finally admitted that the association was successful, and some of them even asked the women to let them join.

The Yellow Bull is a typical patriarchal society. Men monopolize the rights of their property. A woman is exchanged for bridewealth through marriage, and then transitions from the clan of her father to her husband's clan. A woman must obey her father before marriage and obey her husband after she marries. However, women have regarded such situations critically and have never passed the chance to achieve self-determination. In that case, why do they support FGC, which seems central to the patriarchy of the Yellow Bull?

3.3.4.2 FGC and Women's Domain

As I was talking with some women of the Yellow Bull, one of the aged women said with a sarcastic smile, "Men do not know that women who gather at the marriage ceremony say that today is the day of mourning for the bride." According to this woman, women of the Yellow Bull recognize that the ritual symbols of the marriage ceremony suggest that FGC is a symbolic murder of the bride by the groom. However, she interpreted the ritual quite differently. Male elders interpret FGC as an opportunity for the groom to release the bride's power to reproduce. Thus, in their view, men's superiority as a catalyst to enhance women's fertility is justified. On the other hand, the woman ridiculed men who tried to give symbolic meaning to dressing up as killers in order to justify men's superiority. She insinuated that FGC itself was performed in the bride's house only by women, and that men could not interfere.

Men are never able to interfere with FGC, and the way FGC is performed is determined by women. Women do not accept the symbolic interpretations that men try to demonstrate by dressing as killers outside the house. The place where FGC is done is considered an autonomous and independent place where they engrave the mark of their identity by themselves. Women of the Yellow Bull have their own age

organization constituted from four age sets, and through the age set they belong to, they have their own age peers with whom they maintain strong ties even after they are married. The age sets are organized into a hierarchical age organization which forms the social basis of women's solidarity in the Yellow Bull and a means of resisting interference by men. For women of the Yellow Bull, FGC has thus become the mark of their identity and secured communality, and is embedded into the solid age organization.

Though there was a discrepancy between the way women and men interpreted its symbolism, FGC itself was not problematic until the first decade of the twenty-first century when the situation changed. The ban on FGC intensified in Ethiopia, and men's intervention in FGC became apparent among the Yellow Bull.

3.4 Abolition of FGC in the Yellow Bull

3.4.1 *FGM Abolition Campaign Among the Yellow Bull*

The situation concerning FGC in the Yellow Bull changed in 1999 when a girl bled to death after FGC. People said that she drank too much alcohol before the procedure, to ease the pain. The circumciser was caught by the police and jailed for six months. Before then, people did not worry about the risks of FGC or local government interventions. This incident made them recognize that FGC could become a pretext for the government to intervene in their customary practices.

As the abolition campaign spread into the district, it began to influence local politics.⁹ For example, in 2003, a young official of the Yellow Bull was expelled from the administrative office of the district for performing FGC on his bride when he married. However, it was performed in the bride's house by her female relatives

⁹ The abolition of FGC in Ethiopia was attempted for the first time by the National Committee on Traditional Practices of Ethiopia (NCTPE) in 1987. The NCTPE changed its name to "Ye Ethiopia Goji Limadawi Dirgitoch Aswogaj Mahiber" (EGLDAM) in 2004, and then to "Organization for the Development of Women and Children in Ethiopia" (ODWACE) in 2009. ODWACE ceased attempts at FGC abolition shortly after the Charities and Societies Proclamation No. 621/2009, which regulated NGOs concerned with human-rights activities, came into force in 2009.

The federal constitution of 1997 prohibited the physical and mental oppression of women in general. It was a criminal law revised in 2004 that decreed, "Whoever circumcises a woman of any age is punishable with simple imprisonment for not less than three months, or fine not less than five hundred birr." It went on to say that "whoever infibulates the genitalia of a woman is punishable with rigorous imprisonment from three years to five years, that where injury to body or health has resulted due to the act [...] the punishment shall be rigorous imprisonment from five years to ten years" (Proclamation No. 414/2004).

In tandem with strengthening the law in 2009, the Ethiopian government started campaigns of FGC abolition through the media, schools, and gatherings in local communities. The government had hastened to expand the network of health extension workers in provinces, and the abolition of FGC was incorporated in this policy (Boyden et al. 2012). Additionally, many local NGOs addressed this issue in local communities with the assistance of international NGOs

according to custom, and he could not prevent it. He was said to have been entrapped by his rivals in the office.

At about that time, in one of the territorial areas of the Yellow Bull, the chair of the ward (*kebele*) attempted to entrap his political rival by utilizing FGC. The chair threatened his rival, saying that he would report the circumciser to the authorities if the rival let his sister undergo FGC at her marriage ceremony, which was being planned at the time. The circumciser yielded to the threat and cut just a little bit of the bride's genitalia. However, the relatives of the bride and groom got angry, criticized this circumcision, and the rival of the chair faced a difficult predicament. Thus, FGC was used as a tool for political sabotage.

In 2006, one NGO launched a campaign to abolish FGC among the Yellow Bull. The campaign was led by a staff member of the NGO who came from the Yellow Bull. He gathered the elders, youth, chairmen of *kebele*, and health extension workers, and organized workshops where participants discussed the "harmful traditions" that hindered the development of the Yellow Bull.

First, they tackled the problem of HIV infection. The members of the NGO taught the participants how the virus spread and explained that extramarital sexual relations, which were not uncommon among the Yellow Bull, accelerated the rate of infection. After two years of such informational sessions, the participants were said to have recognized the risk of HIV infection and started to refrain from extramarital relations. Until then, during the off-season of agriculture, when marriage ceremonies were held, circumcisers used the same knife when cutting the genitals of all the brides. However, after the campaign, they started using a new razor for each FGC.

The NGO also tackled the custom of the abandonment of the first newborn twin, the taboo against using ox plows and gathering honey, and finally FGC. Although the campaign for the first three taboos was well accepted, opposition to the FGC ban was very strong. The NGO explained the health problems that FGC caused girls, but the participants did not agree to a complete ban on the practice. Despite their resistance to a ban, however, the number of patients who underwent clitoridectomy gradually increased. The NGO's efforts continued until 2013, when the ceremony of FGC abandonment was held at the Yellow Bull.

Meanwhile, the local government's regulations against FGC became stricter. In 2010, the local government gathered educated Yellow Bull men in the town near the administration office. The lecturers dispatched from the provincial capital taught the risks of FGC and told them to organize a committee to abolish "harmful traditions." Although the committee was organized, the members did not initiate any major activities because they knew that abolition was quite difficult. However, as pressure from the state increased, the officials who worked in the local government made every effort to make the committee more functional. They established the posts of chair and secretary of the committee and assigned members to these posts.

3.4.2 Failure of Abolition

By order of the local government, a man was nominated as the chair. After initially refusing, he was persuaded to accept the position. He was the first man among the Yellow Bull who had been educated and had been attempting to reform their “traditions.” He was already opposed to FGC because of the health issues. He had many acquaintances among elderly women and participated in the activities of the Women’s Association. He tried to persuade some elderly women in the association, but they disagreed. They insisted that the FGC was a tradition, and they wanted to continue it. After some discussions they arrived at a compromise. The women decided to stop excision in favor of clitoridectomy. They did so because the NGO had launched a campaign about FGC health problems, and awareness of health problems and HIV infection had spread among them. Furthermore, having observed the brides who, based on the NGO’s warnings, had undergone clitoridectomy instead of excision, they recognized that the clitoridectomy wound healed much faster than that of excision.

The man developed a strategy to satisfy local governments. The Yellow Bull would tell the government they had abandoned FGC, while in practice, the lighter type of FGC would continue. The man energetically organized meetings of women in each territorial section, each age set, and each clan, and gradually got them to reach a consensus. Once a consensus was reached, he convinced the male elders and prepared a ceremony for “the abandonment of FGC.”

In 2013, a big feast to celebrate the abandonment of FGC was held in one of the territorial sections of the Yellow Bull. The officials of the local government, NGO members, and the elders gathered. Oxen were slaughtered, and meat was served to the participants. The chiefs were recognized as persons of merit for their role in the abandonment of the FGC. The NGO funded this ceremony and bought oxen and small livestock for the feast. Ornaments and clothes were bought for the chiefs who won awards. Although it was officially declared that the Yellow Bull abandoned all FGC, they continued practicing the lighter type of FGC. This strategy, however, did not last long.

At that time, the Yellow Bull sometimes brought women who had birth problems to the clinic of a town near the office of the local government. While examining the patients, medical staff of the clinic noticed that women of the Yellow Bull were still undergoing FGC. Furthermore, two women of the Yellow Bull died during childbirth at the clinic, and on receiving reports of those incidents, the local government insisted those deaths were caused by FGC and resumed strictly enforcing the FGC ban among the Yellow Bull.

Women of the Yellow Bull considered this to be unjust, since their FGC had changed from excision to clitoridectomy. According to one of the women, their view was as follows: “Since long ago, women have sometimes died in childbirth. Cows may die, and goats may die when they give birth. The government ascribes the mother’s death to circumcision. Even wild animals die when they give birth, but they do not undergo circumcision.” However, their opinions were not considered.

The elders of the Yellow Bull also tried to resist the government's policy. Their strategy was to evade enforcement. They postponed marriage ceremonies among the Yellow Bull for eight months so that FGC at the ceremony would not become an issue. They planned to resume ceremonies if pressure from the government eased.

However, this strategy failed because of the government's hardline stance. In 2014, the government dispatched policemen to the Yellow Bull, apprehended the elders, and put them in jail. The elders of the northern territorial section surrendered to the government immediately and promised to resume marriage ceremonies. The government dispatched health extension workers guarded by policemen and allowed them to check the genitals of the brides.

The surrender of the elderly and subsequent government measures generated antipathy and anger among the people. The unmarried girls who had not undergone FGC were angriest. All unmarried girls disappeared from the settlement of the Yellow Bull. They planned to flee across borders to neighboring states. They were angry because they felt that the entire process was determined by men, including the elders and officials of the Yellow Bull. They thought that they themselves should make decisions on this matter. The girls who fled from the settlements were persuaded to return, but a girl who had just married, and who was suspected of being the leader of this exodus, was accused of having undergone FGC, and was caught and sentenced to three months' imprisonment. She was jailed for being cut, not for cutting.

In 2014, marriage ceremonies resumed, and health extension workers checked the genitalia of the brides to ensure that they had not undergone FGC. However, the youth in the southern territorial section were infuriated. When health extension workers and policemen approached their settlements, the youth held them off at gunpoint. The government detained some women of the southern territorial section in retaliation, but the youth attacked the jail and released them. The youth of the northern territorial section, who were agitated by the southern youth, also vowed to resist the government. The government then relented.

3.4.3 Stakeholders and Politics of FGC

The case of the Yellow Bull shows how strict abolition campaigns can bring about twisted results as they reached the grassroots, and the attitudes of stakeholders concerned with the abolition of FGC varied according to their social positions.

For women of the Yellow Bull, FGC was an important symbol of their gender and ethnic identity. They believed that they themselves should decide on matters concerning FGC. Women learned of the health problems caused by FGC and gradually accepted clitoridectomy, the lighter type of FGC. However, they strongly opposed a complete ban.

The man appointed as chair of the abolition committee attempted to bridge the gap between the government and the Yellow Bull women. Though he had once supported the abolition of FGC, he accepted the opinion of the women and came up with a scheme that he considered to be a compromise. FGC was not an issue of

tradition for him, but an issue of health and the gender identity of women. However, his strategy failed because of the government's strict stance.

Those who opposed the ban most stubbornly were the youth in the southern territorial section. There were two factors that made them reluctant to go along with the ban.

One is the distance from the state power. Ever since the Yellow Bull was ruled by the state, the government-backed mediators who ruled the Yellow Bull came from the northern territorial section. The southern territorial section was deprived of the chance to produce such mediators. Since they had been alienated from state power, they were deeply resentful of state rule. The government ban on FGC was considered another interference in their tradition by the "disgusting" highlanders.

The other factor was the ceremony of the age organization. At the time, the transition ceremony of the generation set, which is performed once every 30 years, was approaching. Once the transition was complete, the youth would become elders expected to lead each territorial section. They believed that if important traditions such as FGC were abolished around the time of their transition ceremony, it would bring shame to the name of their generation set. Thus, they feared the government's abolition of FGC would damage their own ethnic and gender identities as guardians of their tradition.

The elders of the northern section feared that there would be severe consequences if they resolutely opposed the government. Some of them admonished resisters to obey the government by referring to the invasion of the Ethiopian Empire and the subsequent massacre that occurred 100 years ago. Instead of open resistance, they attempted a strategy of postponement which was the "weapon of the weak" they resorted to when the government imposed unreasonable demands on them. However, this time, government officials were also from the Yellow Bull and saw through their strategy. Confronted with the government's strict measures, the elderly chose to surrender rather than engage in all-out resistance.

Officials from the Yellow Bull were also caught between resistance from the people and the orders from their superiors. Since they knew the situation of the Yellow Bull very well, they recognized that completely abolishing FGM would take a long time. Nevertheless, they took strict measures to try to abolish the practice because the pressure from provincial officials was very strong. The Yellow Bull is a small ethnic group with no officials above the district. Thus, it was difficult for them to defy the orders of their superiors. For officials of the Yellow Bull, arguing back against a direct order was very difficult. If they did not obey the order, they would be accused of colluding in illegal practices. They could not help but proceed with the policy.

3.5 Conclusion

The case of the Yellow Bull shows how strict abolition campaigns for zero tolerance can bring about twisted results when reaching grassroots society. The straightforward enforcement of abolition resulted in multiple conflicts, as described above.

The abolition discourses of the WHO face many difficulties which seem to stem from the way in which the WHO conceptualizes FGC. First, the definition of FGC is quite abstract and detached from the historical and social contexts in which it is practiced, and where practice is quite varied. Second, it lacks a comparative perspective with other risks and values found in actual communities.

FGC is embedded in societies not uniformly, but in various ways, depending on the society. If the abolition of FGC is intended to empower women and to improve the social conditions in which they live, it is necessary to first investigate what kind of conditions they live in, and what kinds of customs and deeds they value. Instead of strict measures of zero tolerance, it is necessary to look for an approach that is localized to each society, particularly when FGC is accepted by inhabitants. Such an approach would incorporate all the stances local stakeholders take on FGC and would attempt to find the best compromise. Such an approach may seem moderate, but it would be accepted by them, and would be a first step toward stopping this practice.

References

- Abebe GM, Assefa H, Tefera B, Kifle WM, Lindstrom D (2009) Support of the continuation of female genital mutilation among adolescents in Jimma Zone, Southwest Ethiopia. *Ethiop J Health Sci* 19(2):1–9. <https://doi.org/10.4314/ejhs.v19i2.69419>
- Andalem M (2013) Female genital mutilation and associated factors in GonchoSiso-Enessie District, East Gojjam Zone, Amhara Region, Ethiopia. *Health Med Inform* 4(4):1–5. <https://doi.org/10.4172/2157-7420.1000141>
- Ayeneu EY, Zemenu T, Dereje NG, Abebe AT, Yazachew EY (2021) Spatial distribution and associated factors of female genital cutting among reproductive-age women in Ethiopia: further analysis of EDHS 2016. *Clin Epidemiol Global Health* 12:1–6. <https://doi.org/10.1016/j.cegh.2021.100858>
- Boyden J (2012) Why are current efforts to eliminate female circumcision in Ethiopia misplaced? *Cult Health Sex* 14(10):1111–1123. <https://doi.org/10.1080/13691058.2012.726743>
- Boyden J, Pankhurst A, Yisak T (2012) Harmful traditional practices and child protection: contested understanding and customs of female early marriage and genital cutting in Ethiopia. *Dev Pract* 22(4):510–522. <https://doi.org/10.1080/09614524.2012.672957>
- Boyle EH (2002) *Female genital cutting: cultural conflict in the global community*. The Johns Hopkins University Press
- Central Statistical Agency (2017). ETHIOPIA: demographic and health survey 2016, <https://dhsprogram.com/publications/publication-fr328-dhs-final-reports.cfm>. Accessed 31 May 2022
- Daniel B, Desalegn M, Muhammedawel K (2015) Intention toward the continuation of female genital mutilation in bale zone, Ethiopia. *Int J Women's Health* 7:85–93. <https://doi.org/10.2147/IJWH.S74832>

- Dawit GA, Zelalem TH, Donaldson FC (2021) Attitude towards female circumcision among women in Ethiopia. *Sex Reprod Healthc* 29:1–8. <https://doi.org/10.1016/j.srhc.2021.100647>
- Getnet M, Wakgari D (2009) Prevalence and associated factors of female genital mutilation among Somali refugees in Eastern Ethiopia: a cross-sectional study. *BMC Public Health* 9(264):1–10. <https://doi.org/10.1186/1471-2458-9-264>
- Gosselin C (2000) Handing over the knife: *Numu* women and the campaign against excision in Mali. In: Shell-Duncan B, Hernlund Y (eds) *Female “circumcision” in Africa: culture, controversy and change*. Lynne Rienner Publishers
- Hayes RO (1974) Female genital mutilation, fertility control, women’s roles, and the patrilineage in Modern Sudan: functional analysis. *Am Ethnol* 2:617–633. <https://doi.org/10.1525/ae.1975.2.4.02a00030>
- Hosken F (1993) *The Hosken report: genital mutilation of females*, fourth revised edition. Women’s International Network News
- Missailidis K, Gebre-Medhin M (2000) Female genital mutilation in Eastern Ethiopia. *Lancet* 356:137–138. [https://doi.org/10.1016/S0140-6736\(00\)02453-3](https://doi.org/10.1016/S0140-6736(00)02453-3)
- Muktar AH, Alinur AA, Mohammed AM (2013) Knowledge, attitude and practice of female genital mutilation among women in Jijiga Town, Eastern Ethiopia. *Gaziantep Med J* 19(3):164–168. <https://doi.org/10.5455/GMJ-30-2013-157>
- Pells K, Robinson L (2014) Criminalisation will not stop FGM in East Africa. *Guardian*. <https://www.theguardian.com/global-development-professionals-network/2014/apr/15/fgm-africa-criminalisation-ethiopia>. Accessed 31 May 2022
- Rahlenbeck SI, Wubegzier M (2009) Growing rejection of female genital cutting among women of reproductive age in Amhara, Ethiopia. *Cult Health Sex* 11(4):443–452. <https://doi.org/10.1080/13691050802711293>
- Robera OF, Lolemo KH, Eyasu AL, Mohammed SO (2020) Prevalence of female genital mutilation among women in Ethiopia: a systematic review and meta-analysis. *Heliyon* 6(7):1–8. <https://doi.org/10.1016/j.heliyon.2020.e04403>
- Rubin G (1975) The traffic in women: notes on the ‘political economy’ of sex. In: Reiter RR (ed) *Toward an anthropology of women*. Monthly Review Press, pp 157–210
- Shell-Duncan B (2008) From health to human rights: female genital cutting and the politics of intervention. *Am Anthropologist* 110(2):225–236. <https://doi.org/10.1111/j.1548-1433.2008.00028.x>
- Thomas LM (2003) *Politics of the womb: women, reproduction, and the state in Kenya*. University of California Press
- United Nations Children’s Fund (UNICEF) (2020) *A profile of female genital mutilation in Ethiopia*. <https://data.unicef.org/resources/a-profile-of-female-genital-mutilation-in-ethiopia/>. Accessed 31 May 2022
- Wondimu SY, Nega AK, Mengistu WG, Arja RA (2012) Female genital mutilation: prevalence, perceptions and effect on women’s health in Kersa District in Ethiopia. *Int J Women’s Health* 4:45–54. <https://doi.org/10.2147/IJWH.S28805>
- Zenebe F (2010) Factors associated with perceived continuation of females’ genital mutilation among women in Ethiopia. *Ethiop Health Sci* 20(1):49–53. <https://doi.org/10.4314/ejhs.v20i1.69425>

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