



POWER TO YOU(TH) - ETHIOPIA

YOUNG PEOPLE'S PERSPECTIVES AND DECISION-MAKING REGARDING HARMFUL PRACTICES, SEXUAL AND GENDER-BASED VIOLENCE AND UNINTENDED PREGNANCY

Results of baseline study (2021), conducted in Amhara and Afar, Ethiopia



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PREFACE

KIT Royal Tropical Institute (KIT), in collaboration with in-country research partners, is pleased to present this baseline study, as one of seven such studies conducted for the Power to You(th) programme in Ethiopia, Ghana, Indonesia, Kenya, Malawi, Senegal and Uganda. The programme has a specific focus on harmful practices (such as female genital mutilation/cutting) and child marriage, sexual and gender-based violence (SGBV) and unintended pregnancy. These are persistent 'key issues' on which insufficient progress has been made over the years.

As the Power to You(th) programme emphasises the power of young people (especially adolescent girls and young women) to be meaningfully included in discussions and decisions, the aim of the baseline studies is to provide an understanding of adolescents' and young people's perspectives regarding harmful practices, SGBV and unintended pregnancy, and their role in decision-making processes regarding these key issues. Moreover, the baseline studies provide baseline data about the voice, agency and decision-making power of young people and how social actors and state actors (through laws and policies) are contributing to positive change. Finally, this baseline study provides information about the civic space and the role of the media in these social change processes on the key issues. The baseline studies have been conducted in areas where the Power to You(th) programme started implementation activities. The main study respondents were young people aged 15–24 years. Youth-friendly research methods such as 'photovoice' have been used to actively engage young people and amplify their voice.

The five-year Power to You(th) programme was developed by a consortium of Amref Flying Doctors, Rutgers and Sonke Gender Justice and its country partners. It is funded by the Dutch Ministry of Foreign Affairs. The consortium strives to foster ownership at the country level, with locally formed coalitions and representation of beneficiaries in its governance. KIT and CHOICE for Youth and Sexuality are the technical partners. KIT has the role of research partner and conducted the baseline studies and desk reviews in collaboration with in-country research partners.

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Bahir Dar team: Belayneh Worku (Supervisor), Almaz Mekonnen, Marshet Kebede and Nafkot Shawl

Ensaro team: Dr. Alemnew Berhanu (Supervisor), Tensae Deneke, Thomas Lemma and Mahlet Fassil

Semera Logia and Asayita team: Dereje Tesema (Supervisor), Shalom Ali, Hussen Kassa, Fatuma Ahmed, Amina Mohammed and Malika Yaid

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ACRONYMS AND ABBREVIATIONS

CSO	Civil society organisation
FGD	Focus group discussion
FGM/C	Female genital mutilation/cutting
IDI	In-depth interview
KII	Key informant interview
MYP	Meaningful youth participation
NGO	Non-governmental organisation
SGBV	Sexual and gender-based violence
SRH	Sexual and reproductive health
SRHR	Sexual and reproductive health and rights
SSI	Semi-structured interview

KEY DEFINITIONS

Child marriage: Any legal or customary union involving a boy or a girl below the age of 18 years (Parson et al., 2015).

Harmful practices: An umbrella term referring to practices (often considered traditional or cultural) that impair the development of adolescents and young people. Child marriage and female genital mutilation/cutting (FGM/C) are examples of harmful practices.

Meaningful youth participation: Inclusive, intentional, mutually respectful partnership between adolescents, youth and adults whereby power is shared, respective contributions are valued, and young people's ideas, perspectives, skills and strengths are integrated into the design and delivery of programmes, strategies, policies, funding mechanisms and organisations that affect their lives and their communities, countries and world (WHO, 2020).

Sexual and gender-based violence (SGBV): Any act of violence that is sexual in nature or inflicted on an individual because of their gender or sexual orientation (United Nations, 1979). SGBV can take different forms (physical, sexual or psychological), and encompasses harmful practices such as child marriage, sex trafficking, honour killings, sex-selective abortion, FGM/C, and sexual harassment and abuse (Starrs et al., 2018).

Unintended pregnancies: Pregnancies that are reported to have been either unwanted (i.e. they occurred when no children, or no more children, were desired) or mistimed (i.e. they occurred earlier than desired) (Santelli et al., 2003). Teenage pregnancies are defined as all pregnancies before the age of 20.

1. INTRODUCTION

This report details the baseline study for Power To You(th) Ethiopia, a five-year programme that envisages that more adolescent girls and young women from underserved communities make informed choices, enjoy their sexuality and are free from harmful practices in a gender-equitable society.

1.1 HARMFUL PRACTICES, SEXUAL AND GENDER-BASED VIOLENCE AND UNINTENDED PREGNANCIES IN ETHIOPIA

Harmful practices, including child marriage and female genital mutilation/cutting (FGM/C), sexual and gender-based violence (SGBV) and unintended teenage pregnancy are multifaceted, interwoven issues which have seriously detrimental effects on the psychological, social and physical well-being of young women and girls. In the last decade, Ethiopia has witnessed a decrease in rates of harmful practices such as child marriage and FGM/C (Wodon et al., 2018; Central Statistical Agency and ICF, 2017). At the same time, data from the 2016 Ethiopia Demographic and Health Survey (Central Statistical Agency and ICF, 2017) show that child marriage and FGM/C are more prevalent in the Amhara and Afar regions than the national prevalence (Table 1). The estimated prevalence of unintended pregnancy in Ethiopia is 26.6% (Teshale and Tesema, 2020). The prevalence of adolescent childbearing varies across regions. It is higher than the national average in Afar, and lower than the national average in Amhara. As for SGBV, about one in every three adolescent girls and young women in Ethiopia have experienced physical or sexual violence, with the rates increasing with age. The rates of physical and sexual violence are lower in Afar than the national rates, which are similar to those in Amhara (Central Statistical Agency and ICF, 2017).¹

Table 1: Prevalence of harmful practices, physical and sexual violence and teenage childbearing

Indicator		Ethiopia	Amhara	Afar
Child marriage	Proportion of young women aged 20–24 married before the age of 28	40.3%	43%	67.4%
	Median age of first marriage among women aged 20–49	17.5	16.2	16.4
FGM/C	Proportion of women aged 15–49 who are circumcised	65%	62%	91%

1. For detailed information about the scope of harmful practices, unintended pregnancy and SGBV in the Afar and Amhara regions of Ethiopia, see the desk review conducted for Power to You(th) Ethiopia (Moran, N. and Juanola, L. (2021) Desk Review Power to You(th). Amsterdam: KIT Royal Tropical Institute).

Childbearing	Median age at first birth among women aged 20–49	19.7	19.4	18.7
	Proportion of women aged 15–19 who have given birth or are pregnant with their first child	13%	8%	23%
Physical and sexual violence	Proportion of women aged 15–49 who have ever experienced physical violence since age 15	23%	24.5%	12.5%
	Proportion of women aged 15–49 who have ever experienced sexual violence at some point in their lives	10.1%	10.5%	4.5%

Source: Central Statistical Agency and ICF (2017)

Ethiopia has made significant progress in increasing access to education and basic health facilities, and adolescents and youth have received greater attention in national policymaking. Since the recognition of the importance of youth participation in the National Youth Policy (2004), young people are becoming increasingly involved in decision-making processes. Research into decision-making abilities of young people in Ethiopia suggests that there has been a general shift over recent years, with increasing space for young people to make decisions on a personal, familial and community level (Presler-Marshall et al., 2020). At the same time, factors such as gender inequality, poverty, lack of youth spaces and limited awareness about youth policies can still hinder active youth participation. According to the Organisation for Economic Co-operation and Development, *“there is little evidence that young Ethiopians are involved in the decision-making processes and the livelihoods of their communities”* (OECD, no date).

1.2 POWER TO YOU(TH) PROGRAMME IN ETHIOPIA

Power to You(th) is a new five-year programme (2021–2025) led by Amref Health Africa, Youth Network for Sustainable Development and Hiwot Ethiopia. It aims to ensure that adolescents and youth (age under 29) are meaningfully included in discussions and decisions, particularly those related to sexual and reproductive health and rights (SRHR). By increasing the participation of young people from a range of backgrounds and groups in political and civic space, the programme aims to improve youth-led advocacy in achieving change in relation to harmful practices, SGBV and poor sexual and reproductive health (SRH) outcomes, including unintended pregnancy. The programme will be implemented in seven districts of Amhara and Afar regional states.

1.3 STUDY OVERVIEW

The goal of this baseline study is to inform the Power to You(th) programme design and strategy in Ethiopia, taking into consideration the programme's theory of change. The theory of change is based on four pathways: strengthening young people to claim civic space, strengthening civil society organisations (CSOs), changing social norms and improving policies and policy implementation. The baseline study is based on a mixed-methods design and was conducted in four intervention areas: two in Amhara (Bahir Dar city and Ensaro *woreda*)² and two in Afar (Semera Logia and Asayita *woredas*). The study is meant to provide a situational analysis of the focus areas of the programme and will provide insights which can be incorporated into the design and/or adaptation of programme interventions.

1.4 REPORT STRUCTURE

This report presents the results of the Power to You(th) baseline study in Ethiopia. The essential elements of the baseline study are detailed in the objectives and methodology sections. The main findings are presented in four chapters in line with the specific research objectives: adolescent and youth perspectives and actions regarding harmful practices and SGBV; meaningful engagement of adolescents and youth in addressing harmful practices, SGBV and unintended pregnancy; the enabling environment for young people's rights and addressing harmful practices, SGBV and unintended pregnancy; and civic space. The discussion presents a reflection on what the findings mean for the Power to You(th) programme in Ethiopia. At the end, after the conclusions, recommendations for the different pathways for the theory of change are formulated.

2. *Woredas* are districts, the third level of the administrative division of Ethiopia, after zones and regional states.

2. STUDY OBJECTIVES

The main purpose of the baseline study is to provide a comprehensive understanding of adolescents' and young people's perspectives regarding harmful practices, SGBV and unintended pregnancy, and their role in decision-making processes regarding these issues in the Amhara and Afar regions of Ethiopia.

The specific objectives of the study are:

- To understand adolescents' and young people's perspectives on harmful practices, SGBV and unintended pregnancy, and whether and how they take action to prevent these practices.
- To assess the (meaningful) engagement of adolescents and young people in lobbying and advocacy, policymaking and community activities on harmful practices, SGBV and unintended pregnancy, and which factors influence it and how.
- To explore the norms and attitudes of community members to the rights of young people, harmful practices, SGBV and unintended pregnancy, to what extent they take action to prevent these issues, and which factors influence this and how.
- To examine the development and implementation of laws and policies addressing harmful practices, SGBV and unintended pregnancy with the intention of ensuring young people's rights.
- To assess the civic space available to influence decision-making about or relating to harmful practices, SGBV and unintended pregnancy, media trends and the use of evidence in related lobbying and advocacy.

3. METHODOLOGY

3.1 MIXED- METHODS APPROACH

The baseline study used a mixed-methods design to collect and analyse both quantitative and qualitative data. The issues and variables which are to be explored to address the aforementioned objectives, the methods used and the main respondents and participants involved in this study are described below.

3.2 STUDY AREAS

The baseline study was conducted in four selected intervention areas of the Power to You(th) programme: Bahir Dar city (urban) and Ensaro *woreda* (rural) in Amhara regional state, and Semera Logia (urban) and Asayita (rural) in Afar regional state. The selection of the study sites was made in consultation with the Power to You(th) Ethiopia team. Annex 1 presents a location map of the study areas and some demographic information about each study area.



**Power to You(th) Ethiopia
implementation areas**

3.3 METHODS

In this baseline study, both quantitative and qualitative methods of data collection were used. More specifically, the following methods were employed.

Qualitative methods

In-depth interviews (IDIs) and photovoice sessions were conducted with adolescent girls (15–19) and young women (20–24) who have been engaged in CSOs or other structures (e.g. youth activists, young leaders or members of youth clubs or youth-led organisations). These interviews were intended to obtain in-depth insights and personal stories on participants' own perspectives on harmful practices, SGBV and unintended pregnancy, experiences in responding to or addressing these issues, and how they perceived their engagement and decision-making space.

Focus group discussions (FGDs) were conducted with groups of adolescent boys and girls (15–19), young women and men (20–24), and parents or caregivers. These FGDs were intended to provide information about shared or diverging views on harmful practices, SGBV and unintended pregnancy, as well as on youth roles and

rights, community norms and values around these topics, and multiple experiences or examples of responses and attitudes to harmful practices, SGBV and unintended pregnancy. The FGDs were also intended to provide rich insights into the roles, voice and decision-making space of young people within the household, family and community.

Semi-structured interviews (SSIs) and key informant interviews (KIIs) with social and state actors were carried out to gain insights into the views of local authorities, policy- and lawmakers and implementers at different levels, service providers at public institutions (e.g. health/social workers and teachers), religious, traditional and opinion leaders, role models and community champions, as well as young people and parents/caregivers regarding harmful practices, SGBV, unintended pregnancy and youth (participation) rights. In addition, these interviews with CSO representatives would help explore the level of civic space and the role of the media.

Quantitative methods

A community-based questionnaire survey was conducted with adolescent girls and boys (15–19) and young women and men (20–24) who were engaged with Power to You(th) CSOs or other relevant youth structures located in the intervention areas. The main aim of the survey was to generate quantitative indicators on how adolescents and young people rated their current type and level of engagement and decision-making regarding (initiatives on) harmful practices, SGBV and unintended pregnancy, to inform the Power to You(th) programme objective of making adolescent and youth engagement more meaningful. The survey was focused on, but not limited to, generating quantitative evidence on variables related to the programme's first three research objectives.

An online survey with (young) CSO members and youth advocates was conducted with the aim of gaining more insights into the enabling environment for advocacy, such as the perceived level of civic space, media preferences and availability of evidence. The survey also aimed to provide some further details on advocacy priorities and strategies.

3.4 SAMPLING AND RECRUITMENT

Community survey

Participants in the quantitative survey were sampled from existing youth and youth-related structures covering the economic and service sectors. Purposive sampling

was used, as no sampling frame with the total number of CSO members was available. At the initial stage, purposive sampling of youth structures was done in consultation with the Power to You(th) country team and its representatives/partners (e.g. Women's, Children's and Youth Affairs Office) at the local level. These included youth clubs, youth-focused organisations, health facilities, schools and small business establishments. In each of these structures, purposive sampling was used to select adolescents and youth of different sexes and ages (adolescents and youth) (see Table 2), and the respondents were recruited purposively with the help of young men and women as facilitators/guides who themselves were members of the different youth and youth-related structures. Youth structures were used as an entry point to access many other youth who were not part of such organisations. Thus, to gather information from youth from different walks of life, the respondents were a mixture of those who actively or passively participated in youth structures and those who did not belong to any organised youth activities.

Table 2: Examples of youth structures from which quantitative survey participants were purposively sampled or used as an entry point for snowballing other youth not part of such structures

Study sites	Selected youth structures
Bahir Dar	YMCA, Bahir Dar Model Youth Centre, Mekedela Cultural Dance Club
Ensaro	Nigat and Tesfa Anti-HIV AIDS and SRH Club, Mukrab Theatre and Literature Club
Semera Logia	Aramis Voluntary Youth Club, health centres
Asayita	Andinet Voluntary Youth Club, Schools

The quantitative survey consisted of a tablet computer-based questionnaire for young people (males and females) aged 15–24 years. The total sample size was 1,200 (50% females and 50% males) (see Table 3), distributed equally across the four baseline study sites (300 respondents from each study site), taking into account the proportions of the 15–19 and 20–24 age groups. As stated earlier, the respondents were drawn from two urban areas and two rural *kebeles*.³ Young women and men (mostly those associated with youth structures) were used as guides to locate and contact purposively selected respondents.

3. *Woreda* (districts) are further subdivided into a number of wards called *kebele* or *ganda* neighbourhood associations.

Table 3: Number of community survey participants by sex and study site

Amhara			Afar		Total
	Bahir Dar	Ensaro	Semera Logia	Asayita	
Female	150	150	150	150	600
Male	150	150	150	150	600
Total	300	300	300	300	1,200

Online survey with CSO members and youth advocates

This survey was managed and distributed using the digital platform SurveyMonkey. Convenience sampling and snowballing techniques were used to reach respondents. A link to the survey was shared by email or phone to a list of representatives of CSOs working with youth and youth advocates by the Power to You(th) country team. Since connectivity challenges were preventing respondents from participating and completing the survey, airtime was provided. This led to a total of 108 respondents who consented to participate, although only 23 completed the online civic space survey.

Interviews and focus group discussions

The qualitative study participants were purposively selected. FGDs were performed with more or less homogeneous groups. In addition, consideration was given to participants of different ages and sexes and with different experiences, opinions and views on the issues under study. Participants in the FGDs and SSIs were recruited from the four baseline study areas. For the IDIs and KIs the selection of participants included more variety in terms of intervention areas—not necessarily from the same study sites as where the community survey was administered. For the SSIs, the study participants were adolescent boys and girls who were identified by youth guides and found to be suitable and competent to discuss issues related to adolescents (see Table 4 for numbers of FGDs, SSIs, KIs and online survey participants).

Table 4: Type and number of qualitative study participants

Type of qualitative interview	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
FGDs:	4	7	2	-	13
Girls/women	2	4	1	-	
Boys/men	2	3	1	-	
IDIs:	2	2	3	2	9
Girls/women	2	1	2	1	
Boys/men	-	1	1	1	
Photovoice:	2	2	2	2	8
Girls	1	1	1	1	
Boys	1	1	1	1	
KIIs	3	3	-	-	6
SIIIs	3	3	8	3	17
Total	14	17	15	7	53
Online civic space survey					23

3.5 DATA ANALYSIS

Qualitative and quantitative data were first analysed separately and then compared and combined for the overall analysis and distillation of key findings and conclusions. Data were cleaned and checked for discrepancies before analysis. The data were analysed using Stata 14 software. Descriptive statistics, percentages and frequency tables were used to present the results of the main variables, including disaggregation by gender and age group, as well as by region, as necessary. Qualitative data were digitally recorded, transcribed, translated into English and independently checked by members of the research team not involved in transcription. A coding framework based on the research table was used to code all the analysis using NVivo software. A thematic analysis was done to identify patterns of meaning. The analysis and triangulation of the quantitative and qualitative components was carried out by a multidisciplinary team of researchers. Power to You(th) Ethiopia's theory of change informed the development of the recommendations.

3.6 QUALITY ASSURANCE

Prior to fieldwork, a quality assessment framework was developed to guide each step of the study in line with Organisation for Economic Co-operation and Development standards of relevance, accuracy, interpretability, timeliness, accessibility, coherence and credibility. Data collection tools were adjusted to the local context and were

pre-tested. All the research tools were translated into Amharic and Afar languages to ensure maximum understanding. Research assistants were trained in quantitative and qualitative methods, and in research ethics. A national researcher oversaw and monitored the data collection and, together with field supervisors, discussed any difficulties arising with all team members daily. Field supervisors checked the completeness of questionnaires and the quality of the first recorded interviews. The analysis and reporting writing were supervised and reviewed by senior researchers.

3.7 STUDY LIMITATIONS

As the aim of the study was to inform the Power to You(th) programme by focusing on its intervention areas and target groups, purposive sampling was used for all methods. Since no probabilistic sampling was used, the findings are not generalisable. To mitigate this limitation and represent different views or perspectives, attempts were made to include informants from rural and urban sites within each region. The purposive selection of youth structures to sample respondents for the community-based survey was intended to reach different relevant subgroups of adolescents and youth (in school and out of school, engaged and not engaged with CSOs, adolescents and youth). For the online survey, the low response rate is the main limitation, influenced by the dependency on Internet connectivity to participate.

3.8 ETHICAL CONSIDERATIONS

Ethical clearance was obtained from the Ethiopian Society of Sociologists, Social Workers and Anthropologists Institutional Review Board. A copy of the ethical approval letter was carried by the research team during data collection. Upon arrival at the respective study sites, each research team submitted the letter to the Women's, Children's and Youth Affairs Office, which in turn wrote a supporting letter for the team to show (when requested) to relevant local authorities (e.g. the police). Research assistants were instructed to present a consent/assent form to each respondent/participant to sign, which emphasised that participation was voluntary and confidential. At the time of data collection, COVID-19 transmission prevention measures were taken. Overall, supervisors' and data collectors' conduct was guided by a fieldwork manual that addressed ethical issues in research during data collection.

4. FINDINGS: ADOLESCENT AND YOUTH PERSPECTIVES AND ACTIONS RELATING TO HARMFUL PRACTICES, SEXUAL AND GENDER-BASED VIOLENCE AND UNINTENDED PREGNANCY

4.1 KNOWLEDGE AND OPINIONS RELATING TO HARMFUL PRACTICES, SGBV AND UNINTENDED PREGNANCY

In all study sites, most respondents (more than 90%) indicated that they felt informed about child marriage, FGM/C, HIV and sexually transmitted diseases, puberty and bodily changes. However, self-reported knowledge of SRHR (71%) and sexual orientation and identity (51%) was lower.

Respondents in Amhara reported being more informed about SRHR topics than those in Afar. This was particularly the case for child marriage (81% in Amhara vs. 67% in Afar), accessing SRH services (54% vs. 29%), and gender identity, expression and roles, including equality, sexual orientation and identity (64% vs. 46%).

In terms of gender, female respondents felt more informed about SRHR topics than males. A female informant (15–19 years) who participated in an FGD in Bahir Dar indicated that her participation in a girls' club helped her to freely discuss various youth issues, including SRH:

"I feel free in schools. I feel free when I meet my friends. There was also girls' club, and there were 40 of us. I freely discuss when I am in the girls' club. Majority of us were females, and we used to freely discuss." (FGD with girls, 15–19, Bahir Dar)

Overall, youth aged 20–24 reported feeling more informed about different SRHR issues than adolescents aged 15–19. However, in Ensaro, both adolescents and youth reported feeling relatively equally informed about SRHR issues.

4.1.1 MAIN AND PREFERRED SOURCES OF SRHR INFORMATION

Respondents were asked about their actual and preferred sources of SRHR information. In both Amhara and Afar, schoolteachers were found to be the main source of SRHR information. Health care workers and friends were also commonly reported. This aligned closely with respondents' preferred sources, as schoolteachers, health care workers and friends were the three preferred sources of SRHR information.

Gender- and age-related differences were observed. In all study sites, female respondents were more likely than males to identify mothers as main and preferred sources of information. For male respondents, youth structures were found to be the

main and preferred sources of information. Youth were more likely than adolescents to report social media as main and preferred sources of information. This suggests a potential age-related digital divide, with adolescents having less online access than older youth. Male FGD participants indicated that health facilities (e.g. health centres) might not be preferred sources of SRHR information for young people because they do not want to be seen by adults when accessing contraceptives.

4.1.2 KNOWLEDGE ABOUT CHILD MARRIAGE

In all study areas, respondents exhibited a high level of knowledge (78%) about the legal minimum age for marriage for girls (Table 5).

Table 5: Respondents' knowledge about the legal age for marriage for girls

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	132/156 (85%)	128/150 (85%)	109/149 (73%)	92/150 (61%)	461/605 (76%)
Male	125/144 (87%)	126/149 (85%)	112/151 (74%)	109/148 (74%)	472/592 (80%)
Total	257/300 (86%)	299/300 (85%)	221/300 (74%)	201/298 (67%)	933/1197 (78%)

The level of knowledge of the legal minimum age for marriage for girls was similarly high in Bahir Dar (86%) and Ensaro (85%), and lower but still high in Semera Logia (74%) and Asayita (67%). No regional gender differences were observed, except in Asayita, where females (61%) had less knowledge of this than males (74%). The most common incorrect responses were 15 and 20 years (both mentioned by 5% of respondents).

Despite this knowledge of the illegality of the practice, there was widespread recognition among study participants that child marriage is pervasive. Many reasons were given for this, including socio-cultural and religious factors, the use of child marriage as a way of 'managing' cases of unwanted pregnancy and sexual abuse, and poverty.

In Amhara and Afar, participants highlighted the role of specific socio-cultural and religious practices, such as establishing social bonds between families in Amhara, and the cultural practice of *absuma* in Afar. This involves a relative of a girl, usually a cousin, being promised the girl in marriage when she is born. Poverty was another

contributing factor, as low-income families could marry off their underage daughters to reduce the number of dependent family members, in addition to gaining a dowry and access to the prospective husband's resources. Economic considerations also motivated some parents to marry off their daughters to older men, who could provide greater economic security. One informant indicated that if the parents were poor, they would marry her off to a rich man. Then, they would ask her to support them.

Preventing premarital sex was also a reason for some parents to want to marry off their daughters. Also, fear of future sexual violence could be a push factor for parents to decide to marry off underage daughters:

"Her parents might be afraid that she would get raped." (FGD with boys, 10–14 years, Ensaro)

Rape was mentioned as a cause of such marriages by some participants. They reported that if an unmarried girl had been the victim of sexual violence, her parents sometimes forced her into marriage with the first willing suitor (regardless of her age), as she was viewed as less desirable by virtue of being an SGBV survivor.

Despite its pervasiveness, nearly all study participants were aware of negative consequences associated with child marriage, such as early childbearing and high rates of school drop-out among girls. Participants mentioned that they knew girls who had been exposed to health problems related to child marriage, such as pelvic pain, fistula and infertility.

4.1.3 KNOWLEDGE ABOUT FGM/C AND ITS CONSEQUENCES

As shown in Table 6, most survey respondents (83%) knew FGM/C was illegal. More female respondents (93%) than males (74%) were aware of the illegality of FGM/C. Contrary to the pattern of knowledge of the legal age for marriage, female respondents (97%) in Asayita were most knowledgeable on this issue, while male respondents (47%) in Ensaro were the least.

Table 6: Respondents' knowledge of the illegality of FGM/C

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	145/156 (93%)	140/150 (93%)	133/149 (89%)	146/150 (97%)	564/605 (93%)
Male	124/144 (86%)	70/150 (47%)	128/151 (85%)	111/150 (74%)	433/595 (73%)
Total	269/300 (90%)	210/300 (70%)	261/300 (87%)	257/300 (86%)	997/1200 (83%)

The vast majority of respondents (93%) indicated that they would not perform FGM/C on their (future) daughters. This was the case in all areas, though notably as many as 97% of respondents in Bahir Dar gave this answer, compared to a low of 89% in Asayita. Among the 4%⁴ of all respondents who said they would cut their (future) daughters, *religious approval* and *discipline/politeness* were the main benefits associated with the practice (each indicated by 37%). The views that FGM/C gives girls *better marriage prospects* (33%), *preserves their virginity* (33%) and ensures *social acceptance* (30%) were also mentioned by those respondents.

Among all respondents, 75% suggested the practice had no benefits, though *disciplining/politeness* was mentioned by 10%, and *social acceptance* was mentioned by 9%. Other benefits selected by a few respondents (fewer than 5%) included: *gives more sexual pleasure for the man*, *contributes to better cleanliness/hygiene* for women and is *approved by religion*. Some participants in the qualitative study referred to FGM/C as a *past bad experience* that was only practised by previous generations. Young people, health extension workers and religious leaders suggested that the practice had been almost entirely eradicated from their areas. A religious leader from Ensaro said: “*These days, only boys are circumcised. We don’t circumcise girls. The Bible doesn’t also allow that.*”

However, a few informants acknowledged that FGM/C was still common in their areas, resulting in part from the misplaced perception that girls who are not circumcised are prone to high levels of sexual desire, and the view that FGM/C (particularly sewing up the genitals) can be used as a proof of sexual abstinence before marriage.

4.1.4 KNOWLEDGE ABOUT SGBV

According to the survey results, adolescents and youth found sexual abuse and harassment unacceptable. Nearly all (99%) of the female respondents and 97% of males (strongly) disagreed with the statement: ‘it is okay to touch someone’s private parts/genitals without their consent.’ When asked if it was acceptable to whistle or make sexual remarks about someone (e.g. while walking on the road to the market), 99% of female respondents and 94% of males (strongly) disagreed. The overwhelming majority of respondents (as many as 99% of females in Asayita) strongly (disagreed) with the statement: ‘it is okay for a husband to force his wife to have sex without asking her.’ Among males, there was a high of 96% (Ensaro) and a low of 89% (Semera Logia) who (strongly) disagreed with this statement, suggesting that some adolescent boys and young men consider forcing a wife to have sex without her consent to be acceptable.

4. These two figures do not add up to 100%, as 3% also stated that they did not know.

A third (30%) of respondents in Amhara and 17% in Afar said that they knew someone who had been sexually abused. The highest figure came from Bahir Dar (38%), followed by Asayita (27%), Ensaro (21%) and Semera (8%). When it comes to prevention of SGBV, *educating people so that they do not abuse others* was suggested by 43% of survey respondents. About 59% of the respondents identified *not travelling alone or at night* as an effective measure, followed by 56% who said *not making friends with people they don't trust*, and 46% who suggested *not talking to unknown boys/men* as a remedy for sexual violence.

Qualitative data indicate that different types of SGBV commonly occurred in communities, and study participants identified rape, abduction, physical as well as verbal violence, domestic violence and school bullying as the most prevalent forms of SGBV. An adolescent girl who participated in an FGD in Ensaro said:

"They say that there is no rape here, but in reality, there is. The case is underrepresented just because there is no data for that. If her parents resist marrying her off or if she doesn't want to get married, the boy/man who proposed marriage would rape her."

A similar view was expressed by a female informant who participated in an FGD:

"Gender-based violence is common. For example, I used to learn at night. However, I dropped out of school because of gender-based violence." (FGD with young women, 20–24 years, Bahir Dar)

Sexual abuse was discussed as being perpetrated by a wide range of individuals, from strangers on the street, schoolmates, teachers, family members and intimate partners. Participants were also aware of the psychological and physical consequences of SGBV, such as fistula, infertility, depression and social anxiety. The social status of a woman and her family is also negatively affected in the event of sexual abuse such as rape, as is the perceived marriageability of victims. As discussed above, child or forced marriage is often used as a social coping strategy by community members, both to prevent potential sexual violence, and as a means of 'restoring' a family's social status (or 'honour') after this has occurred. An adolescent girl (14 years, Semera Logia) explained her friend's experience of forced marriage and school drop-out as a consequence of rape:

"There was a friend of mine, and she was raped by a man against her will, and she got pregnant, and now she is married to him. ...She didn't want him, and her feelings were hurt, and she dropped out of school."

4.1.5 KNOWLEDGE ABOUT UNINTENDED PREGNANCY

The majority of study participants (92%), both females and males, in all study areas were able to name at least one modern method of contraception (see Table 7). This knowledge was even greater among female respondents (94%). The highest awareness of modern contraception was seen in Semera Logia (98% of females and 91% of males). This higher awareness among females might be attributed, in part, to the tendency for females to manage a couple's contraceptive use.

Table 7: Respondents who had knowledge of a modern method of contraception

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	147/156 (94%)	132/150 (88%)	146/149 (98%)	142/150 (95%)	567/605 (94%)
Male	135/144 (94%)	120/150 (80%)	138/151 (91%)	140/150 (93%)	533/595 (90%)
Total	282/300 (94%)	252/300 (84%)	284/300 (95%)	282/300 (94%)	1100/1200 (92%)

Participants were more familiar with some contraceptive methods than with others. The most widely known method was injectables (81%), followed by oral birth control pills (77%), male condoms (67%) and implants (62%). The least known contraceptive method was sterilisation, with only 12% of respondents able to name this method.

4.2 VOICE AND AGENCY

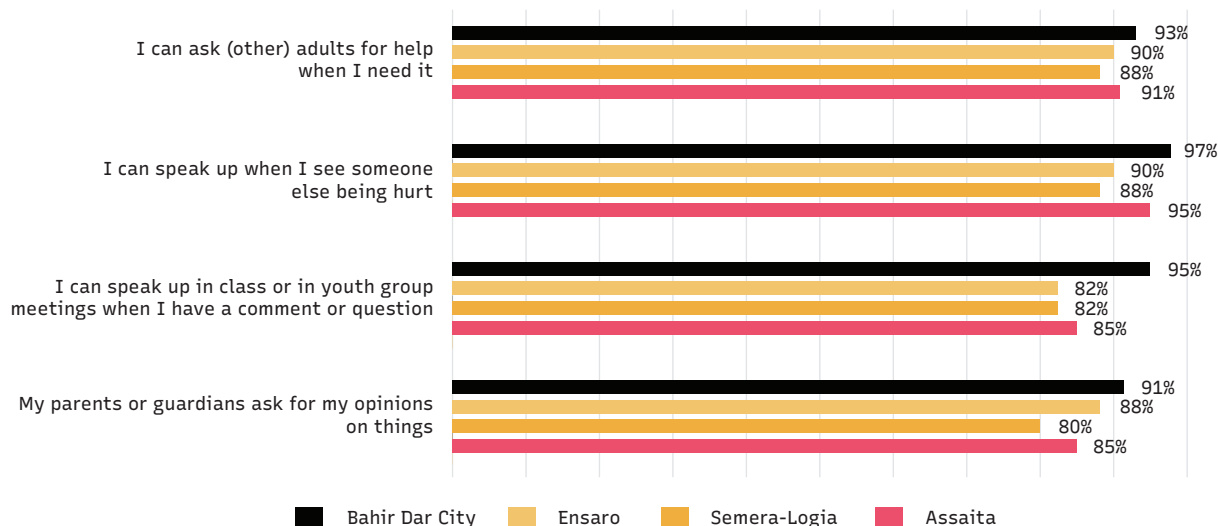
One of the goals of the Power to You(th) Ethiopia programme is to increase adolescents' and young people's ability to express their opinions about various SRHR issues, so that they can take action against child marriage, FGM/C, unintended pregnancy and SGBV. The baseline assessment, therefore, included questions related to current levels of youth voice and agency.

4.2.1 VOICE

The study results show that adolescents and youth could speak up and express themselves in their daily life. As Figure 1 shows, the vast majority in all the study areas felt they could speak up in class or groups and that they were asked by adults for their opinions. The disaggregation by gender shows that, generally, more males than females reported feeling able to speak up in class or group meetings or when they

saw someone else being hurt. This was especially true in Bahir Dar and Ensaro, and less so in Semera Logia and Asayita.

Figure 1: Respondents who can speak up



The majority of the respondents felt they could also express themselves about relationships, puberty, love and pregnancy (72%), with a slightly higher proportion of male than female respondents (78% vs. 65%). Respondents in Bahir Dar were most likely to report this, followed by those in Asayita (see Table 8).

Adolescent girls participating in an FGD in Bahir Dar indicated that living in the city provides more freedom in terms of being able to express themselves and decide about their future. In Asayita, the strong presence of Andinet Volunteers Club (a youth-focused club) could be a factor in the relatively high level of positive responses from Asayita respondents. The club (through its 45 permanent and 200 honorary members) is actively engaged in creating awareness about SGBV and harmful traditional practices, as well as promoting young people's participation in local policymaking.

Table 8: Adolescents and youth who feel they can express themselves about relationships, puberty, love and pregnancy in their community

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	115/156 (74%)	97/150 (65%)	87/149 (58%)	105/150 (70%)	404/605 (67%)
Male	129/144 (90%)	105/150 (70%)	109/151 (72%)	119/150 (79%)	462/595 (78%)
Total	244/300 (81%)	202/300 (67%)	196/300 (65%)	224/300 (75%)	866/1200 (72%)

4.2.2 SPACES TO EXPRESS THEMSELVES

Generally, respondents appeared more comfortable expressing themselves in front of peers than in front of adults (see Table 9). Disaggregation by gender shows that in Bahir Dar, males felt freer than females expressing themselves in front of peers, while the reverse was true in Ensaro (i.e. females felt freer).

Table 9: Respondents who feel confident expressing themselves

	Bahir Dar		Ensaro		Semera Logia		Asayita	
	Female	Male	Female	Male	Female	Male	Female	Male
	Feel free to express yourself in front of other young people							
Always	68%	78%	74%	58%	35%	52%	28%	69%
Sometimes	25%	19%	13%	29%	46%	40%	68%	29%
Never	7%	3%	13%	13%	19%	8%	4%	2%
	Feel safe to express yourself in front of adults in the community							
Always	36%	42%	52%	33%	30%	44%	11%	56%
Sometimes	32%	40%	17%	39%	45%	46%	70%	37%
Never	31%	18%	31%	27%	25%	10%	19%	7%

The above findings also align with the qualitative data, as many adolescents and young people said that they felt comfortable discussing various issues with their friends. Adolescents and youth who are actively engaged in youth structures (e.g. youth clubs) might develop confidence and communication skills to effectively interact with adults, friends and peers. Examples include Nigat & Tesfa Anti-HIV/AIDS SRH club members in Ensaro, and Aramis Volunteer Youth Club members in Semera Logia. These organisations have been instrumental in educating their respective communities (on market days, after religious services) against harmful traditional practices, SGBV and unintended pregnancy. A member of the Nigata & Tesfa youth club in Ensaro explained how being a member in the club helped her express herself more freely:

"It is very good. It helped me to gain confidence. Before I joined the club, I was so shy. Let alone talking with people like you, I don't even greet people. It helped me to build my confidence. I learnt to freely express myself in front of the community and families. I also learnt how to convince people. I also get the chance to upgrade my skills. I got many experiences."

Similarly, a member of the Aramis Youth Volunteer Club in Semera Logia argued that his development from childhood to adolescence was made possible following his participation in the club:

"I freely speak in Aramis. I have nothing to hide from Aramis. ...I have no words for Aramis. It changed me from a child to [an adolescent]. Previously, I was not capable of speaking in public. I wasn't even capable of expressing myself. Now, I've learned how to share my ideas. It made me mature. That's why I always talk about Aramis."

Participants said that Aramis was a volunteer club that was established based on the common interests of adolescents and young people. A member of Aramis who participated in an FGD in Semera Logia described the nature of youth participation:

"Aramis was developed from football teams. We are young people with the same dreams and needs. So, we formed Aramis. We consider each parts of a body that function together. Aramis is my body part. I express my opinion for my friends in Aramis and ask their opinion. We all make discussion openly. Openness is our principle. My friends in Aramis are like family for me. Our intimacy allows us to understand each other and decide good things for our club. I choose my friends and make decision by consulting them. Of course it makes me happy. Aramis creates a good platform where we learn from each other and make decision than deciding alone."

Picture 1: Members of the Aramis youth club (in Semera Logia) discussing SRH issues



4.2.3 DECISION- MAKING

Another area in which respondents' level of voice and agency is reflected is decision-making in daily life. The overwhelming majority of respondents, except those in Ensaro, indicated that they themselves were involved in decision-making regarding: (1) what they do in their free time (92–98%); (2) how much education they will get (93–96%); (3) whom they can be friends with (95–100%); and (4) whom and when they will marry (93–99%) (see Table 10). Of the four study sites, respondents from rural Ensaro seemed to have the least decision-making power. Table 10 shows those respondents who said that they were one of the people involved in making these decisions, with both females and males reporting similar levels of involvement in decision-making.

Table 10: Decision-making in daily life

	Bahir Dar	Ensaro	Semera Logia	Asayita
Number and proportion of respondents who said that they are one of the individuals involved in deciding what they do in their free time				
Female	95%	81%	98%	92%
Male	99%	70%	95%	92%
Number and proportion of respondents who said that they are one of the individuals involved in deciding how much education they will get				
Female	95%	89%	93%	96%
Male	99%	86%	97%	96%
Number and proportion of respondents who said that they are one of the individuals involved in deciding whom they can be friends with				
Female	94%	87%	95%	97%
Male	100%	91%	97%	95%
Number and proportion of respondents who said that they are one of the individuals involved in deciding whom and when they will marry				
Female	97%	81%	93%	93%
Male	99%	87%	93%	93%

Adolescent and youth decision-making in relation to their education, free time and marriage also came up during FGDs. Often adolescents and youth were not the sole decision makers. Mothers and fathers (in that order) were also reported by respondents as having decision-making power in relation to their daily lives. Regarding the influence of mothers, a female informant from Bahir Dar said:

"I mostly discuss with my mum. We are very close. I have nothing to hide from her. She also tells me everything. She prefers asking my opinion than her parents. She listens and values my ideas. Then, I would discuss with my friends."

FGD participants also supported the above findings. For example, a female FGD participant (15–19) in Bahir Dar indicated that decisions about relationships, education and careers were mostly made by young people, with occasional advice from parents and friends:

"Parents don't want us to be in relationships. However, I can decide about it. ...My parents don't want me to be a psychiatrist. They want me to be a doctor. However, I can decide what to learn. I am the one to choose my profession. ...We have to decide by ourselves. They don't live our life. We have to listen to their advice, but we should be the decision-maker. Our life is like glass. We can't do anything once it is broken."

Young people especially girls are increasingly taking education as a means to escape harmful practices such as child marriage. They are devoting more time for studying and parents are now willing to give them more space for study (Picture 2).

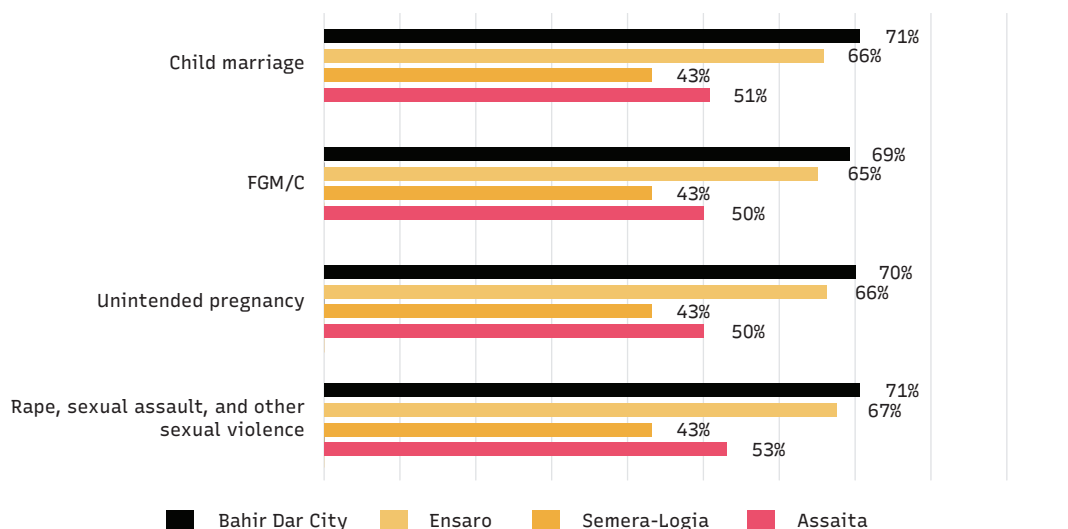
Picture 2: An Ensaro girl is studying so that she can escape child marriage



4.2.4 VOICE AND AGENCY IN RELATION TO HARMFUL PRACTICES, UNINTENDED PREGNANCY AND SGBV

The study found that not all adolescents and youth felt comfortable discussing harmful practices, SGBV and unintended pregnancy on social media. As can be seen from Figure 2, around two thirds of the survey respondents in Amhara felt comfortable discussing these topics, while in Afar this was the case for less than half of the respondents. About two out of every five respondents in Afar did not feel at all comfortable discussing these issues on social media.

Figure 2: Respondents who feel comfortable expressing themselves on social media about Power to You(th) topics



The survey results also point to a limited involvement of youth in decisions regarding harmful practices. Only a small minority of the respondents reported that adults involved young people in decision-making around child marriage and FGM/C, with the highest proportion in Ensaro, and the lowest in Bahir Dar (see Table 11).

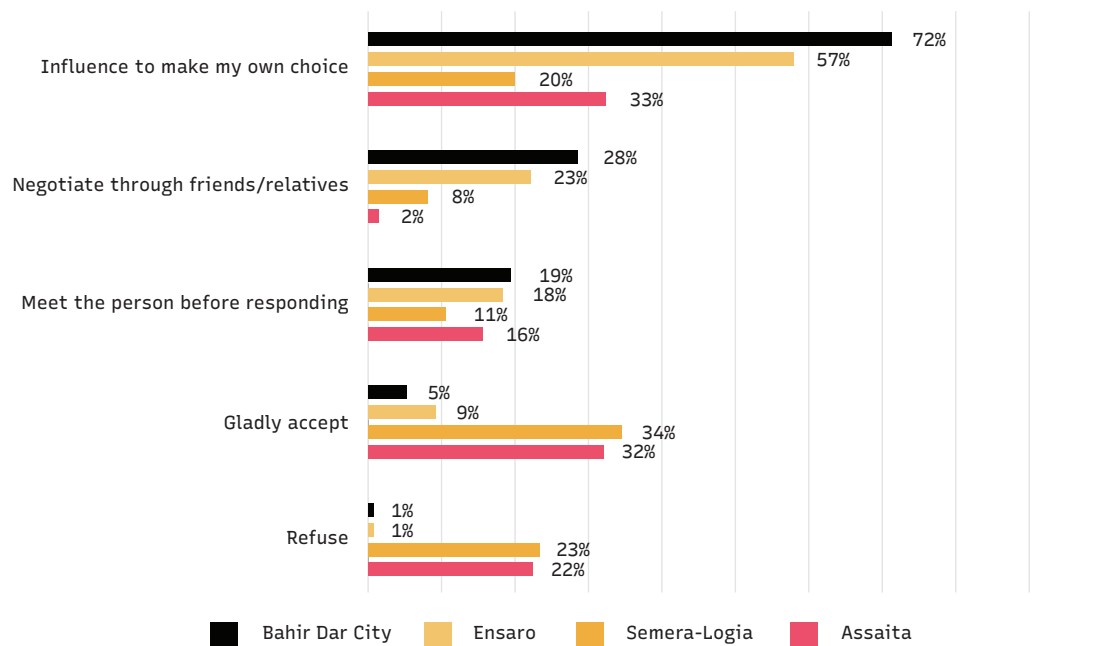
Table 11: Involvement of youth in decision-making regarding harmful practices

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	51/156 (33%)	71/150 (47%)	54/149 (36%)	46/150 (31%)	222/605 (37%)
Male	42/144 (29%)	48/150 (32%)	59/151 (39%)	45/150 (30%)	194/595 (33%)
Total	93/300 (31%)	119/300 (40%)	113/300 (38%)	91/300 (30%)	416/1200 (35%)

At the same time, the findings also clearly showed that the majority of adolescents and young people would not remain passive and would exercise some form of agency if they faced an arranged marriage or if they witnessed sexual abuse.

As Figure 3 shows, in Amhara, the most common response to an arranged marriage reported by the survey respondents was to try to influence their parents to make their own choice on whom to marry, followed by negotiating with friends or relatives to try to make their own choice. In Afar, the responses were more diverse, with gladly accepting the decision the most common. In Semera Logia, this was followed by refusing, which was reported by more females than males. Meeting the person before responding was more common among males than females. These results suggest that agency strategies around influencing and negotiation were more common in Amhara than Afar.

Figure 3: Potential reactions to an arranged marriage

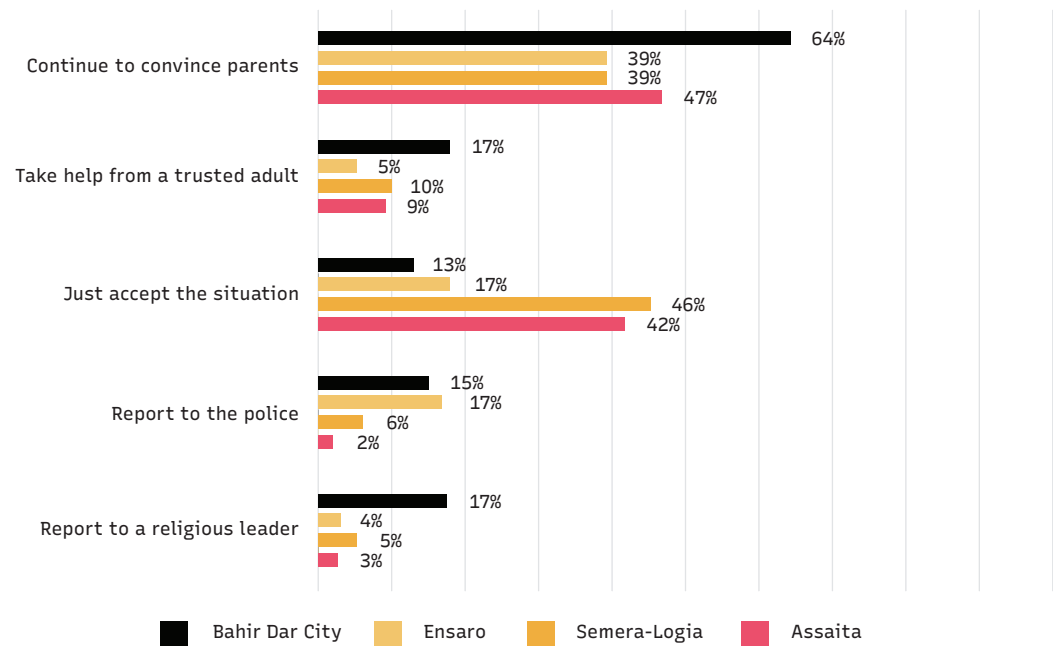


The reasons why respondents would respond like this also differ between the two regions. In the study sites in Afar, respondents commonly stated that their parents knew what was best for them. In Amhara, respondents referred more to reasons of educational aspirations or their young age. In Bahir Dar, in particular, a large majority mentioned they wanted to marry someone of their own choice.

If parents continued to pressure them to marry, trying to continue to convince them was the most common response across the study sites (see Figure 4). In Afar, accepting the situation was also a potential reaction for females and males in Semera

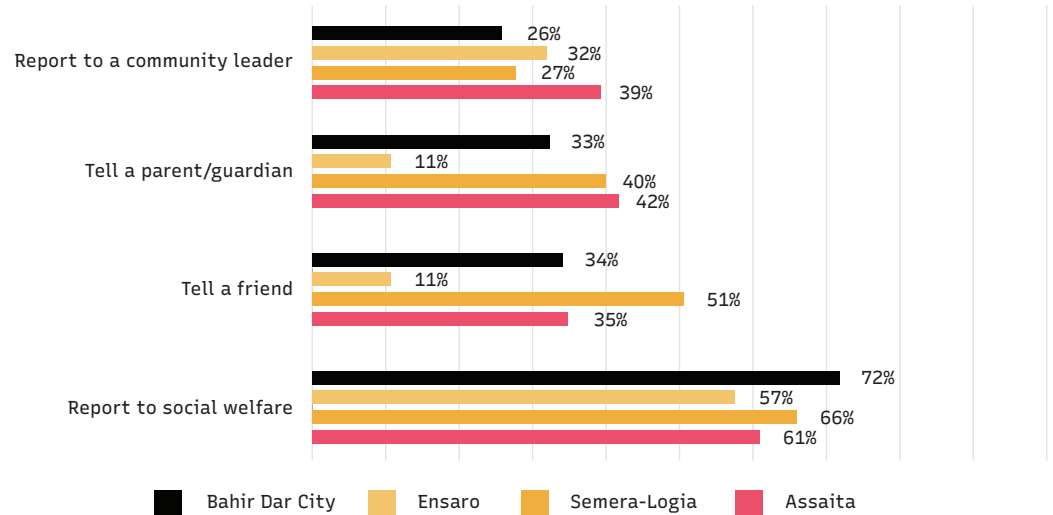
Logia and Asayita. In Amhara, reporting the case to the police was a potential reaction for females in Ensaro, while seeking help from a trusted adult was more commonly mentioned by females in Bahir Dar. Among males in Bahir Dar, reporting it to a religious leader or a relative were among the main potential reactions.

Figure 4: Reactions in case of continued pressure to marry



In relation to SGBV, when asked what they would do if they witnessed or suspected sexual abuse against someone in their community, the majority would also exercise some form of agency. Fewer than 5% said they would not do anything. The majority indicated that they would report it to social welfare (see Figure 5). In Semera Logia, telling a friend was also reported by half of the respondents.

Figure 5: Reactions to sexual abuse



The disaggregation by gender shows that reporting it to social welfare was less likely among males in Ensaro (41%) and Asayita (49%), while around 70% of the female respondents in all study sites said they would choose this reaction. Talking to the abuser or perpetrator was only reported by a minority of the respondents in all study areas, but a few participants in the FGDs said they would confront or stop the abuser, such as a young male participating in an FGD in Bahir Dar, who stated:

"If you see someone beating a girl, you will think of your sister or mother. Thus, you would be able to stop him. In that case, the girl would get moral, and the guy would be afraid of being scolded by another person. So, he doesn't dare to do it again."

Moreover, the results also show that respondents felt confident that if they reported a case of sexual abuse, they would receive the appropriate support and protection. This feeling was slightly less in Bahir Dar than in the other three study areas. Females were more confident than males that they would receive the appropriate support (see Table 12).

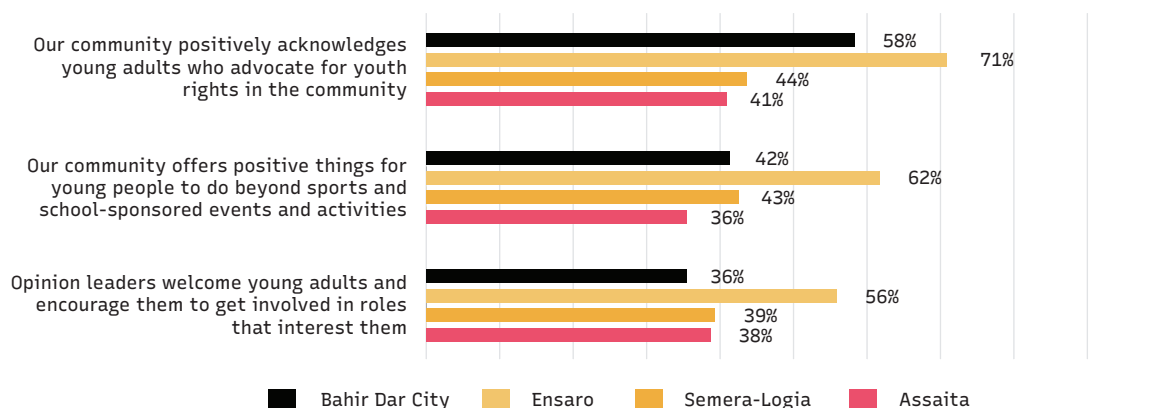
Table 12: Confidence in reporting sexual abuse

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	93/156 (60%)	135/150 (90%)	129/149 (87%)	143/150 (95%)	500/605 (83%)
Male	81/144 (56%)	107/150 (71%)	130/151 (86%)	103/150 (69%)	421/595 (71%)
Total	174/300 (58%)	242/300 (81%)	259/300 (86%)	246/300 (82%)	921/1200 (77%)

4.3 ADOLESCENT AND YOUTH PARTICIPATION IN COMMUNITY ACTIVITIES ON HARMFUL PRACTICES, SGBV AND UNINTENDED PREGNANCY

The respondents were asked if their communities encouraged them to participate in activities focusing on SRHR issues. Less than half of the respondents (except in Ensaro) felt that the community encouraged them to participate and get involved in different activities and youth associations to work on various youth-related community activities (see Figure 6).

Figure 6: Adolescent and youth participation in their community



4.3.1 CHILD MARRIAGE

Regarding child marriage, there was limited participation of adolescents and youth in all study areas in any activities or action to prevent child marriage. Only 14% of the respondents (see Table 13) indicated that they had participated in activities or had taken action to prevent child marriage. The proportion of female participants was even lower (13%). The lowest level of participation was in Asayita (8%), while the highest was in Bahir Dar (23%).

Table 13: Respondents' participation in community activities to prevent child marriage

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	29/156 (19%)	16/150 (11%)	20/149 (13%)	11/150 (7%)	76/605 (13%)
Male	39/144 (27%)	23/150 (15%)	13/138 (9%)	12/150 (8%)	87/508 (15%)
Total	68/300 (23%)	39/300 (13%)	33/267 (11%)	23/300 (8%)	163/1200 (14%)

Regarding activities in which the respondents were involved and the action they have taken to prevent child marriage, educating girls was the most common, undertaken by an average of 77% of respondents in all study areas, followed by empowering girls (51%) and rallying the wider community to stand up for girls' rights (41%).

About 95% of respondents from all the study areas said they felt teachers were either supportive or very supportive in addressing child marriage, with youth feeling more

supported than adolescents. The second most supportive or very supportive group was health care workers, acknowledged by 89% of the respondents (and by 99% of youth and 94% of adolescents in Bahir Dar). Peer support was considered important by 82% of the respondents, followed by parents and other family members (72%).

4.3.2 FGM/C

There has been limited participation by adolescents and youth in all study areas in any activities to prevent FGM/C. Only 11% of the respondents said they had participated in activities or taken action to prevent FGM/C (see Table 14).

Table 14: Respondents' participation in community activities to prevent FGM/C

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	15/157 (10%)	18/149 (12%)	23/149 (15%)	10/150 (7%)	66/605 (11%)
Male	19/144 (13%)	17/150 (11%)	15/151 (10%)	11/150 (7%)	62/595 (10%)
Total	34/301 (11%)	35/299 (12%)	38/300 (13%)	21/300 (7%)	128/1200 (11%)

Participation was even lower for male respondents—10% across all the study sites. The lowest participation rate was in Asayita (7% for both males and females), whereas the highest was in Semera Logia (15%), followed by Bahir Dar (13%). Overall, more female respondents than males have participated in activities or taken action to prevent FGM/C.

The vast majority (96%) of the respondents said that health care workers were the most supportive community members in addressing FGM/C. This response was followed by teachers (93%), peers (82%) and parents (72%). More female respondents (86%) than male respondents (79%) felt that peers were supportive or very supportive in addressing FGM/C, and more of the respondents in Afar (83%) than those in Amhara (73%) felt that parents were supportive or very supportive.

4.3.3 SGBV

There has been limited participation by adolescents and young people in activities to prevent sexual abuse. Only 11% of the respondents said they had participated in any activities or taken action to prevent sexual abuse (see Table 15).

Table 15: Respondents' participation in community activities to prevent SGBV

	Bahir Dar	Ensaro	Semera Logia	Asayita	Total
Female	27/157 (17%)	14/149 (9%)	17/149 (11%)	9/150 (6%)	67/605 (11%)
Male	31/144 (22%)	12/150 (8%)	11/151 (7%)	7/150 (5%)	61/595 (10%)
Total	58/301 (19%)	26/299 (9%)	28/300 (9%)	16/300 (5%)	128/1200 (11%)

Respondents' level of participation was found to be highest in Bahir Dar (22% among males) and lowest in Asayita (5% among males). Overall, participation in Bahir Dar was higher than in the other sites, with 19% of the respondents saying they had participated in activities or taken action to prevent sexual abuse. The data show that more female than male respondents have participated in activities or taken action to prevent sexual abuse.

Of the different members of the community, teachers were considered the most supportive of adolescents' and young people's involvement in activities or action to address SGBV. About 95% of the respondents said they felt teachers were (very) supportive in addressing SGBV. Health care workers were considered the second most supportive community members, with 94% of the respondents saying they were (very) supportive in addressing SGBV. The third most (very) supportive community group was parents, with 93% of the respondents saying they were (very) supportive of young people's involvement in activities to prevent SGBV.

While adolescents and youth have limited experience of participating in activities to prevent harmful practices, unintended pregnancy and SGBV, the majority in all study sites said they were willing to engage and participate, particularly in Bahir Dar and Asayita, where more than 90% of the respondents expressed their willingness to participate (see Figure 7).

Figure 7: Willingness to participate in activities to prevent harmful practices, SGBV and teenage pregnancy



5. FINDINGS: (MEANINGFUL) ENGAGEMENT OF ADOLESCENTS AND YOUTH IN ADDRESSING HARMFUL PRACTICES, SEXUAL AND GENDER-BASED VIOLENCE AND UNINTENDED PREGNANCY

5.1 ADOLESCENT AND YOUTH ENGAGEMENT IN CSOs

One of the goals of the Power to You(th) programme in Ethiopia is to increase adolescents' and young people's meaningful engagement in various government or non-government (CSO) activities and in decision- or policymaking and programme implementation. Thus, the Power to You(th) baseline assessment included questions related to engagement of adolescents and youth in addressing the issues under consideration.

The level of engagement of adolescents and youth in CSOs was generally low in all the study areas. Overall, only 16% of adolescents and young people claimed to have engaged in CSOs, with a lower proportion of females than males. It was more common for adolescents and young people to be engaged in CSOs in Bahir Dar (36%) than in the other areas. The lowest level of engagement was among females in Asayita and females in Semera Logia (2% and 5%, respectively) (see Table 16).

Table 16: Adolescent and youth engagement with CSOs across the baseline study sites

	Bahir Dar	Ensaro	Semera Logia	Asayita
Proportion of adolescents and young people who are engaged with a CSO that carries out specific activities with young people				
Female	49/157 (31%)	19/149 (13%)	7/149 (5%)	3/150 (2%)
Male	59/144 (41%)	25/150 (17%)	10/151 (7%)	21/150 (14%)
Total	108/301 (36%)	44/299 (15%)	17/300 (6%)	24/300 (8%)

The low level of engagement in CSOs exhibited by adolescents and young people in all the study sites could be attributed to a lack of willingness on the part of leaders of CSOs to engage young people, fear that young people might demand more accountability, weak advocacy work, and budget limitations.

"Even though I can't say that they have satisfactory participation, they are involved in such kind of initiatives. There are different youth-led organisations. Although it is not strong, there are also youth clubs that work on SRH and arts. These clubs are involved in such initiatives. There are also government-based youth associations, federations and leagues. There are also women's associations and leagues. Even though these youth

associations and organisations engage in different initiatives, they don't have enough budget and resources. So their engagement is not satisfactory. Thus, they need to be helped." (SSI, social actor, Bahir Dar)

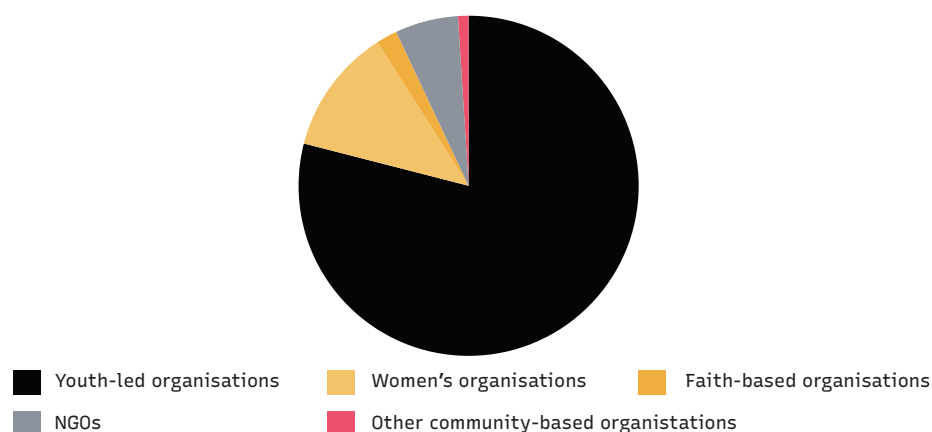
A government representative from Ensaro admitted that while budget shortages could be a constraint, the lack of recognition of the value of adolescents' and young people's ideas and inputs during policymaking and programme design could also be a factor:

"Lack of information, budget and lack of administrative skills can be cited as challenges. They also don't get recognition for their work. The society doesn't recognise them. It demoralises them. Even if they have the experience and knowledge, they don't have enough budget to implement their projects."

5.1.1 TYPES OF CSOs

Youth-led organisations were the most common type of CSO in which adolescents and youth were engaged (Figure 8). In Bahir Dar and Semera Logia, this was the case for the large majority of adolescents and youth engaged (95% and 100%, respectively). In Ensaro and Asayita, some adolescents and youth were engaged in other type of CSOs, such as women's organisations or faith-based organisations in Ensaro (33% and 7%, respectively) and NGOs in Asayita (14%).

Figure 8: Type of CSOs in which adolescents and youth were engaged



Qualitative data reveal that most of the young people were engaged in school clubs. Apart from common youth clubs, student parliaments that were not directly financed by the government were reported in Afar. The parliaments seemed to emulate the federal parliament and consisted of important units. The participants argued that student parliaments were the main mechanism through which to influence the school

administration, promote the involvement of students in school affairs and protect the rights of adolescents and young people. A leader of the parliament in Asayita said:

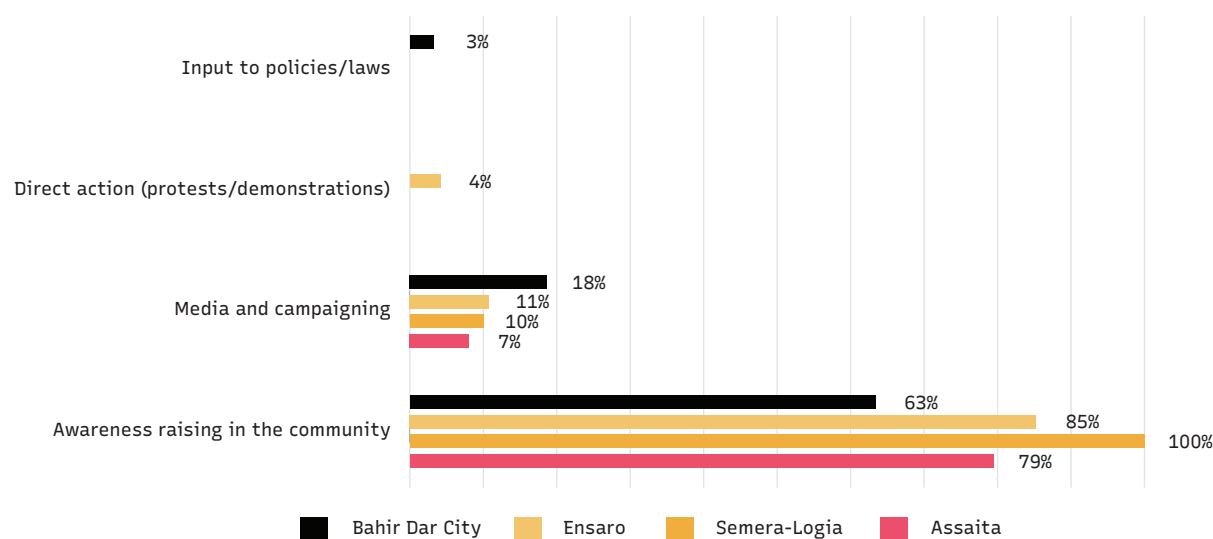
“I am acting as a prime minister. Our parliament has around 45 members. There are seven ministers and five central committees. The ministers usually work together with club heads. If club heads report any harmful practices, the minister would bring the case to the parliament. Then, the parliament members would meet and discuss on the issue. If we can solve the problem, we would solve it. Otherwise, we would present the case for school directors and teachers.”

According to the participants, some of the school clubs were supported by non-governmental organisations (NGOs) such as Plan International, Amref and Hiwot Ethiopia. In areas where NGOs were not active, young people seemed to develop their school clubs into youth associations and volunteer clubs with broader mission and activities than school-based clubs.

5.1.2 TYPE OF ACTIVITIES

The engagement of adolescents and youth in CSOs mainly focused on awareness-raising in their communities (see Figure 9). Some adolescents and youth in the four study areas had also been involved in media and campaigning, but only a minority. Only a few respondents had experience of participating in direct action such as protests or demonstrations (4% in Ensaro) and of providing input to policies and laws (3% in Bahir Dar).

Figure 9: Type of activities in which adolescents and youth were engaged



The qualitative narratives point in the same direction. Adolescents and young people engaged in youth-led organisations were involved in raising awareness regarding SRH issues and youth rights in the community. The following quote illustrates the formation and objectives of one youth-led organisation:

“Our association was established in 2010, ensuing the disastrous famine in the Afar region. Our focus was to save children who were severely affected by the drought by providing water and other assistances. Our humanitarian intervention was appreciated by the regional media and the wider community. After completing our high school education, we developed our clubs into a legal volunteer youth association and named it Andinet, meaning ‘unity’. We broadened the scope of our activities from emergency intervention to assisting poor people in our community and creating awareness regarding harmful traditional practices and youth rights.” (FGD with boys, Asayita)

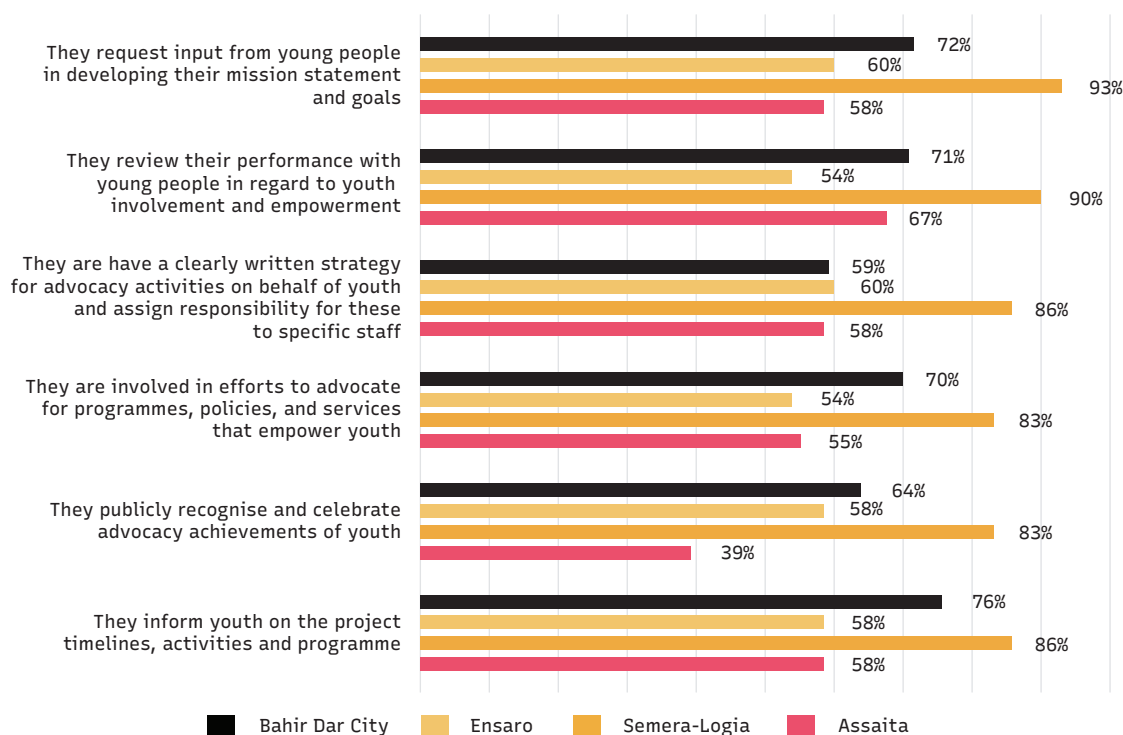
Adolescents and young people seemed to predominantly use marketplaces and other public gatherings to reach a large number of people. Some participants mentioned that a lack of resources and consistent support were the major challenges to the effectiveness of youth associations. Since most of them depended on their own membership contributions, they tended to limit their involvement to awareness creation, which does not require a lot of resources. Participants also argued that the performance of youth associations affiliated with NGOs tended to be unsustainable:

“Even if we are willing to teach the community, we don’t have support. Previously, we used to get a donation from Hiwot Ethiopia. We haven’t got any support since the project ended. Therefore, we are restricted. Our activities are limited to teaching the community on market days.” (FGD with girls, Ensaro)

5.1.3 CSOs’ EFFORTS TO MEANINGFULLY ENGAGE YOUTH

Through the survey, adolescents and young people involved in a CSO were asked to what extent these CSOs consulted their young members on the vision and objectives of the organisation, internally assessed how they were doing in terms of youth engagement, participated in initiatives promoting youth empowerment or informed young people about their activities. Figure 10 shows the proportion of adolescents and young people who indicated that in the CSOs in which they were engaged this happened sometimes, often or always. The results indicate that, in general, those CSOs were meaningfully engaging young people. The results also suggest that the engagement of adolescents and young people was most meaningful in Semera Logia, followed by Bahir Dar, then the other two, more rural, study areas of Ensaro and Asayita.

Figure 10: Meaningful engagement of youth in CSOs



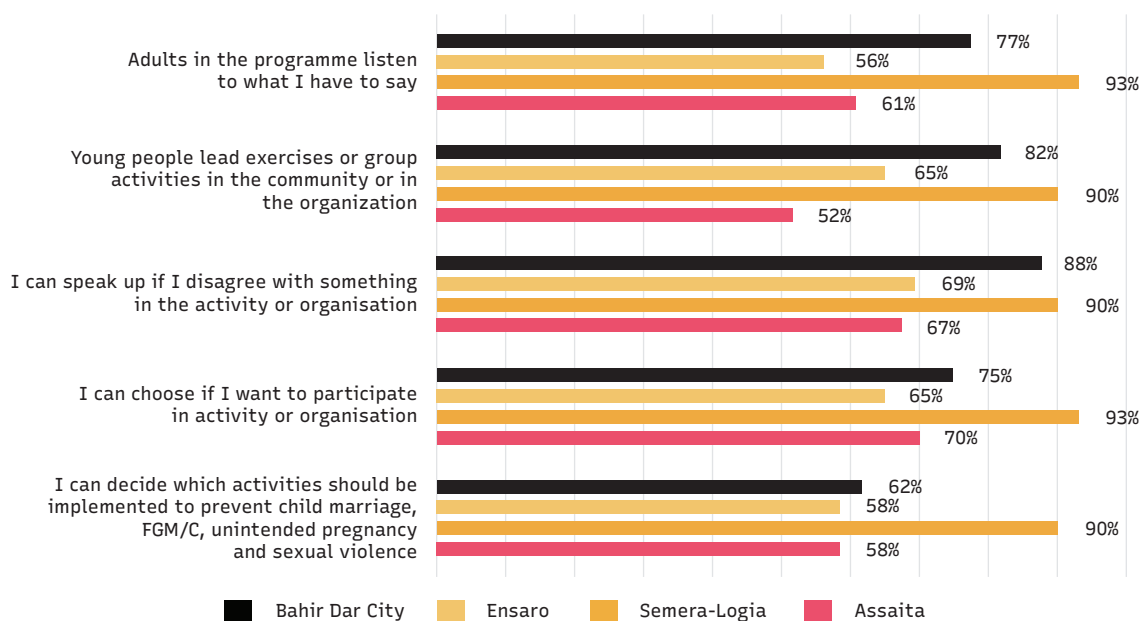
In the interviews, participants stated they had known the aim of their organisation and their role in fulfilling the overall goal. They said that their contributions were valued in their organisation.

"We meet at our centre daily. We discuss with our leaders about our daily tasks, plans and the problems we face during the working time. I can express my opinion for my friends in Aramis and ask their opinion." (IDI, boy, Semera Logia)

"In the club, we are responsible for teaching the community. I am the leader of the literature department. We go to the marketplace and teach the community every Saturday on harmful traditional practices and other current issues. In addition to the acting, I am responsible for writing poems and dancing. I am expected to boost the confidence of the members. I mentored six youth who didn't have any idea about theatre." (IDI, female, Ensaro)

Similarly, the data from the survey also indicate that most of the respondents who were engaged in a CSOs felt that their engagement was meaningful. That is, they reported that adults listened to what they had to say, and they could express disagreements, lead exercises or decide on what activities had to be implemented. Again, more respondents in Semera Logia and Bahir Dar rated their engagement as meaningful than those in Ensaro and, in particular, Asayita (Figure 11).

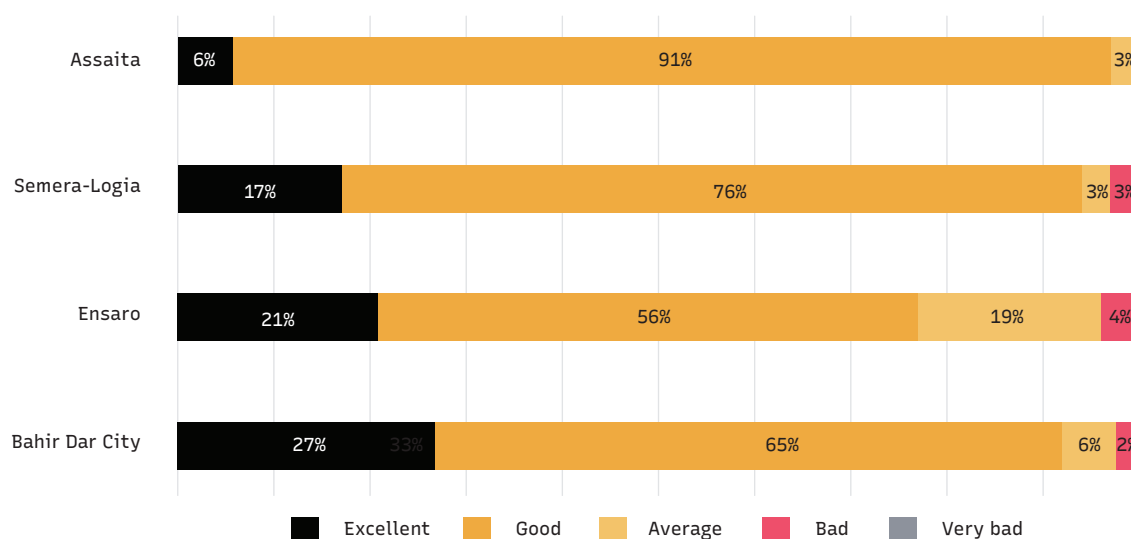
Figure 11: Perceptions of adolescents and youth about their engagement



5.1.4 QUALITY OF YOUTH'S ROLE AND PARTICIPATION IN THESE CSOs

The majority of the adolescents and young people rated their participation in CSOs as good. Figure 12 shows that 27% of the respondents in Bahir Dar rated their engagement as excellent, followed by Ensaro (21%). Only 6% of the respondents in Asayita reported their participation as excellent.

Figure 12: Quality of youth's role and participation in these CSOs



Overall, the majority of the participants were satisfied with their engagement in the CSOs they had initiated by themselves. The main source of their satisfaction was reported to be the democratic nature of their participation, on the one hand, and the positive impact of their engagement, on the other. Some young girls exercised leadership in their youth clubs and expressed their satisfaction of supporting the members and other young people in their community:

"I am one of the founders of Andinet volunteer club. Therefore, my ideas mostly get accepted. I mobilise other members to support the excluded young people such as poor and uneducated. I am happy for deciding about myself. In addition, it really feels happy when you become the voice of your community. I feel happy when I speak on the behalf of mothers, children, and youth who failed to get medical services." (IDI, girl, Asayita)

Picture 3: A girl (standing, left) who is member of the Andinet youth club (in Asayita) is involved in charity work



Similarly, a girl from Esnaro is very happy about her engagement in Nigat and Tesfa anti-AIDS and reproductive health club. She thinks that the club has made her visible:

"I am happy about my role as a member of Nigat and Tesfa anti-AIDS and reproductive health club. I feel very happy when I help my parents. I also teach the community happily. Only a few members of the community are against my engagement in the youth club. I am satisfied with the role I assumed in the club because it made me visible. Since I don't listen to the people against me, I don't care about them. The members of the club, including the leadership, always give me a space to express my opinion, and I am happy about it." (IDI, female, Esnaro)

5.2 ADOLESCENT AND YOUTH EXPERIENCES OF LOBBYING, ADVOCACY AND POLICYMAKING

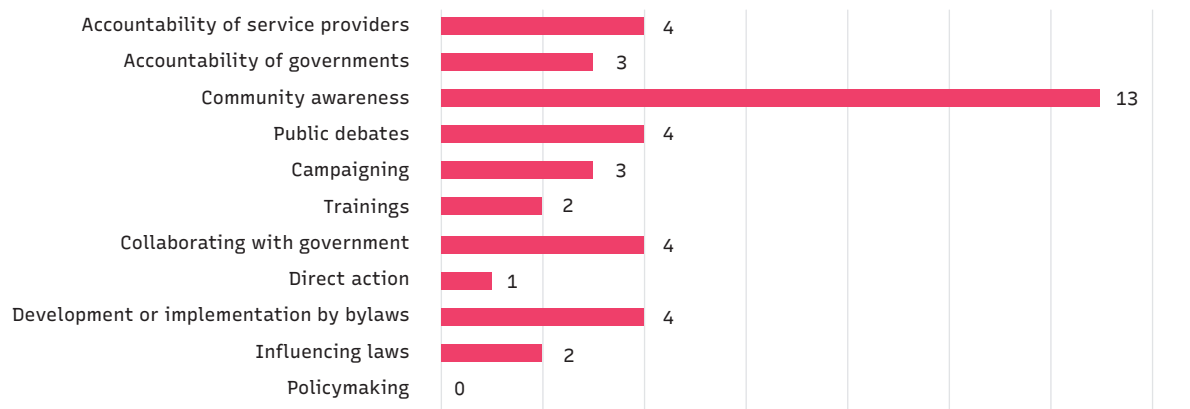
Twenty-three young people who had already participated in lobbying and advocacy activities shared their experiences through the online survey.

These young people were all engaged in CSOs, mainly youth organisations. These organisations generally operated at the community or district level and worked on a variety of topics related to SRHR. According to the responses given by these young people, access to comprehensive sexuality education, preventing SGBV, eliminating child marriage and recognition for young people's rights were some of the most common lobbying and advocacy priorities of these organisations.

Influencing policies was not the primary aim of these organisations, except for one. Nine respondents said the organisations they were engaged in did not do this type of work at all. For the rest, the level to which they aimed to influence policies varied: very occasionally (2), to some extent (9), and many activities focused on it (3). Community awareness-raising was the most common activity in which these organisations were involved (16 out of 23 respondents). Six respondents indicated that the organisations in which they were engaged were involved in the development and/or implementation of by-laws. Only one respondent reported that the organisation in which he was engaged was involved in influencing policymaking and implementation.

Therefore, the results also show that the lobbying and advocacy experiences of these young people were not necessarily aimed at influencing laws or policies, but rather other types of activities. None of the respondents were engaged in influencing policymaking and implementation. Figure 13 shows the types of lobbying and advocacy activities in which young people were involved. Community awareness-raising was the most common. Other lobbying and advocacy activities reported by various respondents were collaborating with government through membership of working groups (4); development or implementation of by-laws (4); participation in public debates in the media or on social media (4); and holding health facilities accountable for provision of (youth-friendly) service delivery (4).

Figure 13: Types of lobbying and advocacy activities in which adolescents and youth were engaged



The qualitative findings also show that youth-led organisations had little involvement in policymaking. According to the participants, government departments were not willing to involve youth-led associations. Organisations initiated and led by youth received less attention than government-initiated youth associations such as youth federations and leagues:

“They don’t involve us in decision-making. Nor do they want us to participate to that level. If they allow us, we would raise many questions, and they can’t answer our questions. If they failed to answer our questions, they would be accountable. So, they don’t want us to participate.” (SSI, adolescent male, Asayita)

While a general understanding of engaging young people in policymaking and implementation seemed to exist in the study area, it was rarely put into practice. In other cases, young people were engaged in local affairs, but not meaningfully:

“On this matter, the youth... are the owners, and you cannot run things without the involvement of the owners, it’s not productive. Therefore, the youth should be involved and there needs to be a program that involves the youth. When we first design programs usually at the beginning or whenever we plan any work, it should be centred around them. So, if you ask me where the level of their participation currently is, it is not as much as it should be and I think that’s why we are not effective. However, there are works done before by the women and children affairs office, which means us, there are a lot of things done to make sure the participation of the youth, there are directions on it but it is still not enough we need to incorporate the youth more.” (SSI, Health worker, Semera Logia).

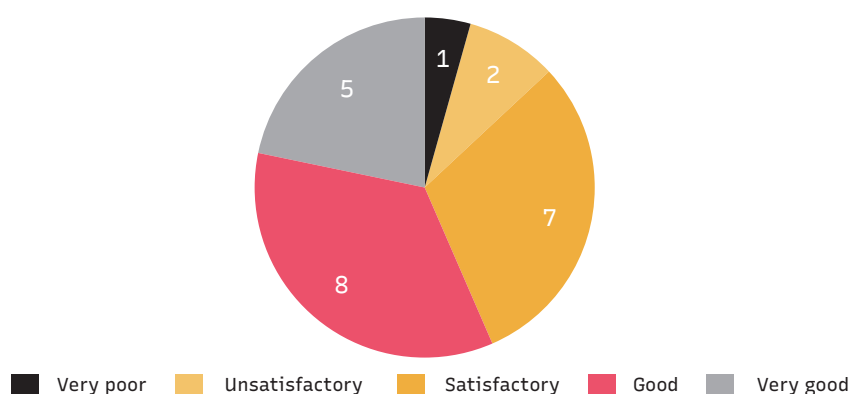
Also, some initiatives to involve young people were observed in Bahir Dar, although the engagement appears to be inconsistent:

“Belay Zeleke sub-city has its own youth association. The association has more than 422 youth members. These members meet and discuss social, political, and economic and health related issues. In such cases, they would invite us and we provide trainings based on their need and priority. They also have their own laws. Youth associations have their own policy and accountability mechanisms. They also participate in volunteer activities. They participate at any stage of service delivery. It was only recently that we recognised the benefit of involving young people.” (KII, health officer, Bahir Dar)

5.2.1 QUALITY OF YOUTH PARTICIPATION IN LOBBYING AND ADVOCACY

Regarding the quality of their participation in the above-mentioned lobbying and advocacy activities, the majority of these young people interviewed judged it to be satisfactory, good or very good.

Figure 14: Quality of youth participation in lobbying and advocacy



The online survey also asked about the role of adolescents and youth in the CSOs in which they were engaged, and the results indicate that for most the engagement was meaningful. More than half of them could lead exercises, decide what activities to implement, express their disagreement, give input to the organisation’s mission and objectives and were informed about the organisation’s activities (Figure 15).

Figure 15: Youth roles in CSOs



6. FINDINGS: (ENABLING) ENVIRONMENT FOR YOUNG PEOPLE'S RIGHTS AND ADDRESSING HARMFUL PRACTICES, SEXUAL AND GENDER-BASED VIOLENCE AND UNINTENDED PREGNANCY

In this chapter, the (enabling) environment for young people's rights and addressing harmful practices, SGBV and unintended pregnancy is explored. To this end, gender and social norms among community-level social actors and attitudes to the different themes are examined. The social actors included in this baseline study are young girls and boys, representatives of the Women's, Children's and Youth Affairs Office, representatives of Amref Health Africa, health professionals and community/religious leaders.

6.1 GENDER AND SOCIAL NORMS AMONG COMMUNITY-LEVEL SOCIAL ACTORS

Several insights into community-level gender and social norms were gained from the interviews. Distinct gender norms were found to be prevalent in Ensaro, where interviews indicated that the rural community seems to believe that women do not have the ability to perform in the same way as men. The community has more confidence in what men can say and do. As emerged from the interviews, the local community tends to believe that women do not have the capacity to bring about any positive change in the community. According to one girl from the region:

"People in rural areas assume that a girl would bring nothing even if she is educated. She wouldn't make any difference." (FGD with girls, 15–19 years, Ensaro)

Similar gender norms can be found in Afar, where young boys, starting from their childhood, have the opportunity to participate in parental and community discussions, allowing them to express their views. This also gives them the opportunity to speak out about their rights and address harmful practices within the society. Girls, however, are not afforded the privilege of engagement with parents and community. As they cannot go out and speak in public about their rights, they remain the primary victims of harmful traditional practices. Similarly, a significant gender difference in youth participation is noted in Ensaro. Interviewees referred to the youth clubs or associations in the region, where boys are welcome to participate, but girls are not supposed to. According to interviewees, the community is afraid that young girls will have sexual intercourse, be raped, become pregnant or get sexually transmitted infections. Young girls are expected to focus on domestic work and education. In Afar too, gender norms prescribe that girls focus on domestic work, such as cooking food and caring for children and elderly people, rather than allow them to

take part in the public domain. As emerged from the interviews, parents and the community at large do not allow young women to move freely outside their home or in public space, whereas boys are relatively free to go where they want and play outside the home with their friends.

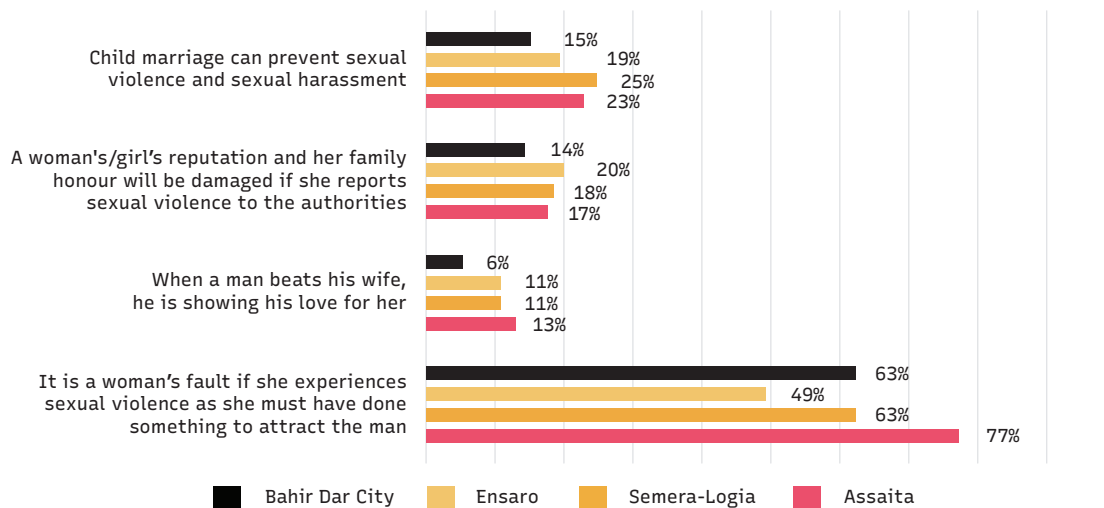
The survey results suggest that gender norms might be restricting women's decision-making more in Afar than in Amhara. While in Bahir Dar and Ensaro a minority of the respondents (strongly agreed) with the statement 'Men (not women) make the final decisions in the household' (33% and 35%, respectively), in Amhara the majority of the respondents (strongly) agreed (70% in Semera Logia and 63% in Asayita). Lastly, gender inequality is seen to be worse for women living with disabilities. As one interviewee explained:

"Women with disabilities have a big challenge of getting married, while boys with disabilities can marry anyone. I know a person who is crippled. He dates many girls. Ethiopian people think that women with disability can't do anything. ...No matter how beautiful disabled girls are, the society wouldn't accept them." (FGD with girls, 20–29 years, Bahir Dar)

In addition, women with disabilities face more difficulty accessing SRH services. Interviewees explained that women with disabilities often do not get proper treatment when they go to health institutions, and that society considers women with disabilities as valueless and a burden on the country.

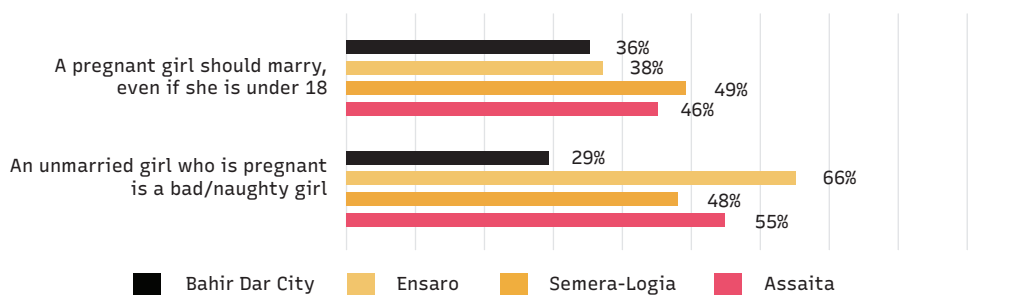
In accordance with the findings from interviews, the survey found generally restrictive gender norms for women and people with disabilities. In all regions, 95% or more of the respondents agreed that people with disabilities should not have children. Furthermore, the majority of respondents (strongly) agreed that was a woman's fault if she experienced sexual violence, as she must have done something to provoke the man (Figure 16).

Figure 16: Gender norms around SGBV



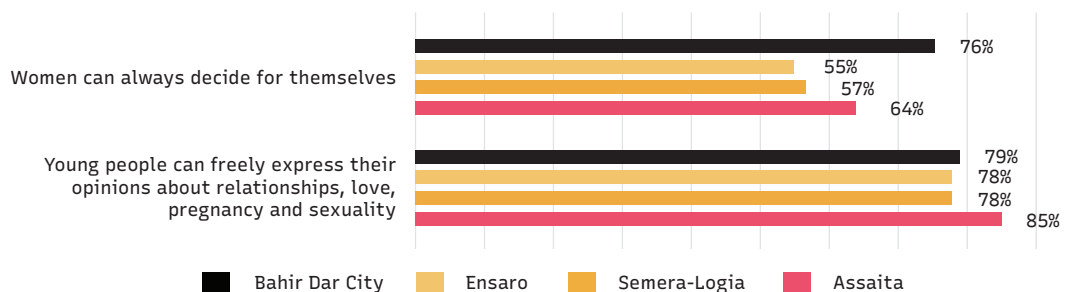
As for pregnancy outside marriage, the survey results indicate that there was a more negative attitude to unmarried pregnant women in rural areas. As Figure 17 shows, more than half of the respondents in Ensaro and Asaita considered unmarried pregnant girls bad. Slightly fewer than half of the respondents in these areas (strongly) agreed that pregnant girls should get married even if they are below the age of 18.

Figure 17: Gender norms regarding pregnancy outside marriage



Despite these restrictive gender norms, at the same time, respondents largely agreed that women could always decide for themselves (ranging from 55% in Ensaro to 76% in Bahir Dar) and that young people could freely express their opinions about relationships, love, pregnancy and sexuality (around 80% of respondents in all regions) (Figure 18).

Figure 18: Voice and decision-making of youth and women



6.2 ATTITUDES AND ACTIONS TAKEN BY SOCIAL ACTORS RELATING TO YOUTH RIGHTS, HARMFUL PRACTICES, SGBV AND UNINTENDED PREGNANCY

The environment, attitudes and actions taken regarding the specific themes of youth rights, harmful practices, SGBV and unintended pregnancy will be described theme by theme.

6.2.1 YOUTH RIGHTS

As explored above, the space for youth to speak out about youth rights and SRHR is strongly gendered. It is, therefore, difficult to speak of 'youth rights' as a whole when such large disparities exist. As explored in Section 4.3, boys can generally exercise their rights by joining youth clubs and speaking out on diverse topics. Girls, on the other hand, are prevented from doing so.

6.2.2 HARMFUL PRACTICES

Although harmful traditional practices such as child marriage and FGM/C used to be very common in Afar, it was found that awareness had improved recently (especially among youth), and these harmful practices were dwindling with time:

"Most people are aware of harmful effects of such practices and refrain from doing it."
(IDI, boy, 15–19 years, Semera Logia)

6.2.3 CHILD MARRIAGE

Still, harmful practices remain prevalent. In Ensaro, child marriage was found to still be common. As emerged from the interviews, many young girls in this area are expected to marry at an early age regardless of their consent, and do not get the chance

to discuss with their parents when and whom to marry. Some parents give their underage girls to a family they regard as prestigious, wealthy and respected, allowing them to build up a social connection with the rich family besides receiving a large sum of money. Another contributing factor to child marriage—for example, in rural areas in Ensaro—is found in parents' fear of premarital pregnancy and its reputational damage and social repercussions in the community. Regarding premarital sexual activity, besides the risk of unintended pregnancy, false beliefs that prior sexual activity will be immediately apparent on a girl's or woman's wedding night are widespread. To avoid being socially shamed in this way, some parents seek to marry off their daughters at an early age.

However, at the same time, some parents or caregivers and religious leaders agreed that the practice of child marriage was decreasing. Participants said that young people increasingly demanded that their rights be respected and were less willing to accept a marriage proposal from their parents even if they were consulted in advance. A 48-year-old religious leader from Ensaro confirmed this:

"Yes, some of them ask us that if the Bible allows women to marry anyone they like, why their parents chose for them. We tell them that the tradition changes as time changes. Her choice should be respected. To be honest, these days, women marry on their own terms. Parents stopped interfering. Every parent is now aware about child marriage. They also educate their children. So children get married when and with whom they like."

Indeed, young girls were found to be increasingly ready to stand up against child marriage. Women who participated in FGDs even indicated that their daughters told them they would sue them if they tried to marry them off without their consent. As one interviewee in Bahir Dar mentioned:

"There are girls, who went to the law enforcements offices, and managed their wedding to be cancelled. They also reported to the police, and their parents were detained. Even though they wouldn't be detained for long, the girls' right would at least be respected. She would get the chance to get back to school and build her future."

Young girls were also reported to stand up against child marriage on behalf of their girlfriends whose parents might be preparing to marry them off. As a girl from Semera Logia explained:

"Child marriage and FGM are bad for women, and it is dangerous for their health to give birth while underage and hurts them during menstruation as well. So I am ready to stop it. If my friend is getting married, I am going to go to the women's affairs office and

tell them she is getting married by force. ...They would come and help me to stop the planned marriage.” (FGD with girls, 15–19 years, Semera Logia)

Girls are also drawing lessons from peers who got married while underage and are unhappy. A friend's or a neighbour's bad experience of child marriage can teach young girls not to follow their example. This was indicated by a caregiver who participated in an FGD in Ensaro:

“They support each other. For example, if one of their friends get married, and lives bad life, they would resist to get married. If she becomes economically poor, or if her husband abuses her, the rest wouldn't get married.”

As described by caregivers during FGDs, young girls, especially those who go to school, are not alone in their fight against child marriage; they are assisted by social actors such as teachers, religious leaders, health care workers and police officers. For instance, teachers regularly monitor those girls who might be absent from class, as weddings often result in school interruptions. Adolescents and young people also explained that teachers often helped schoolgirls (who are at risk of marriage) to stop marriage by negotiating with their parents or by reporting it to police, who may interfere to cancel the marriage— although bribes or threats of harm to the police by the groom's family can deter them from putting a halt to the marriage. As a recommendation, some study participants suggested that young women should receive support from the government or other governing bodies if communities ignore legal restrictions against child marriage.

The study participants indicated that girls engaged in *absuma* marriages were not expected to report it to anyone, since the practice is sanctioned by clan leaders.

6.2.4 FGM/C

Remarkably, increasing numbers of women giving birth in hospitals or health centres have brought down the prevalence of FGM/C. FGD participants in Semera Logia explained that, previously, women usually gave birth at home, and FGM/C was prevalent. However, if a mother delivers in a health centre, she stays there for three or more days, allowing health professionals to advise her against cutting her daughters, and inform her about the harmful effects of FGM/C. In Ensaro, this educational role of health care workers was mentioned by a caregiver:

“Health workers usually call us for meeting. Then they teach us about prenatal complications. They also teach us not to circumcise girls. There is no FGM here. They also tell us to give birth in health centres.” (FGD with parents/caregivers, Ensaro)

Besides this educational role of health care workers, interviewees explained that FGM/C was usually performed in Afar within the first seven days of birth, as the belief was that the cuts from FGM/C would heal faster if the girl were cut at this time. Therefore, if mothers just stay in the health centre for a few days, it can prevent newborn babies from undergoing FGM/C.

Besides action taken in health centres, interviews with the Afar Health Bureau and Women's, Children's and Youth Affairs Office indicated that FGM/C had been the main focus of work by both the government and NGOs, which may be a contributing factor to the high level of knowledge among respondents in Semera Logia and Asayita. In Bahir Dar, the urban context (characterised by high literacy levels and exposure to media that broadcast programmes on harmful practices) may explain the relatively high level of awareness. The presence of youth and girls' clubs in schools (e.g. in Bahir Dar) could also have contributed to knowledge of the illegality and harmful consequences of FGM/C.

6.2.5 SGBV

As an example of societal norms around SGBV in some areas, a government representative in Ensaro mentioned the cultural ceremony of Qibit:

"There is a cultural ceremony called Qibit at Ensaro. In this ceremony, girls might be raped. The society takes it as normal thing. In such cases, girls are not encouraged to report it to the police." (KII, government representative, Ensaro)

In addition to SGBV not being condemned by the community, it was found that victims are discouraged from reporting cases of SGBV, and allegations of lying and victim blaming are common. Deeply entrenched gender inequality and the use of drugs (e.g. chat) were factors suggested as contributing to SGBV:

"There are many drug users in Debre Birhan, Minjar and Shewa Robit. So the government should work on this. When boys are high with drugs, they might rape girls, and the girls might be exposed to unintended pregnancy." (KII, government representative, Ensaro)

It should be noted that the COVID-19 pandemic has increased rates of SGBV, as discussed by a key informant in Semera Logia. According to this key informant, confirmed rape cases and domestic violence in Ethiopia increased during lockdown, which led to the Zim Alilim ('I will not keep quiet/no more silence') campaign. The SGBV reporting mechanism (which states there must be a supporting witness) is reported to be weak, which discourages victims from seeking legal justice. Another factor that hinders survivors of SGBV in reporting it to the police is corruption (e.g. the acceptance of bribes by some police officers):

"If a girl gets raped, the boy would be punished. He would be freed by paying money to the agents of criminal justice system." (FGD with females, 19–20 years, Semera Logia)

However, some informants noticed improvements in recent years related to SGBV, while still calling for more attention and work on the issue. One male FGD participant in Ensaro suggested that there was a need to conduct more awareness-raising activities in the community to protect girls from rape and other forms of sexual violence:

"Awareness should be created for the society. We should teach the society about the harms of rape. We should teach them not to rape girls."

6.2.6 UNINTENDED PREGNANCY

Harmful gender norms play an important role in unintended pregnancy in the regions studied. Participants mentioned that many men and boys were not taking responsibility to prevent unintended pregnancy:

"They don't have a role. They might tell their wives to use contraceptives. There are also men who don't comment at all." (FGD with females, 20–29 years, Ensaro)

Listening to girls about their worries related to unintended pregnancy and openly discussing appropriate contraceptive methods were suggested during the interviews as helpful in controlling unintended pregnancy. Instead, nearly all responsibility is put on the girls. Participants suggested that girls should not be fooled easily and should think about either using a condom or other alternative contraceptive methods before falling in love and having sex.

The influence of societal gender norms on unintended pregnancy is also illustrated by a participant in a girls' FGD in Ensaro:

"Youth can't control their [sexual] feelings. In that case, women are always the victims. We would lose many things. Boys wouldn't be asked the reason why his girl gets pregnant. However, girls would be nagged. So, it would be better if they try to control their feelings. They should also listen to girls' ideas and opinions. It would be better if awareness is created for boys." (FGD with girls, 15–19 years, Bahir Dar)

6.2.7 ACTIONS OF SOCIAL ACTORS

Social actors and stakeholders were found to take diverse actions on the themes of youth rights, harmful practices, SGBV and unintended pregnancy. The initiatives undertaken in each region are described below.

In Bahir Dar, health centres provide a 'one-stop centre' where survivors of SGBV can receive psychosocial counselling. Some health centres also provide 'youth-friendly' services where young people can access family planning services in an environment designated specifically for youth. Besides these health centres, Plan International, the Women's, Children's and Youth Affairs Office, World Vision, GSI, Youth Network for Sustainable Development (YNSD), Young Men's Christian Association (YMCA) and Amref Health Africa are the government agencies and NGOs that have a practical role in working with youth. For example, one informant mentioned the youth-focused training provided by Plan International:

"They train graduated youth or youth who dropped out from 10th grade or more. They give IT-related and vocational training. Then it would help us to have motivation to start a job by ourselves."

In Ensaro, the Women's, Children's and Youth Affairs Office is one of the front-line government organisations responsible for reducing harmful practices, SGBV and unintended pregnancy. The office collaborates with the police, schools and NGOs (such as Hiwot Ethiopia) to address young people's SRH issues. Experts from the office work closely with *kebele* officials and health care workers to identify those who commit SGBV. Furthermore, as mentioned before, health extension workers teach mothers about the negative effects of FGM/C. A health extension worker from Ensaro explained that mothers were educated during their seven-day postnatal care or when they took their babies in for postnatal vaccination. Besides this, health care workers also offer family planning services after 45 days of delivery. One health care worker saw a considerable impact of this educational work on mothers:

"They would totally accept our teachings. Most of them have children who at least go to school. As a result, they would have the awareness about it. Based on that, there is no FGM. I usually ask mothers and teams of development association. Neither of them circumcises their girls. They have been educated from the past. Health extension workers who worked before me have educated them, and they already have the awareness."

Besides this, a government representative mentioned that the *woreda* Women's, Children's and Youth Affairs Office coordinates a *woreda*-level committee comprising

different representatives (police, government communication offices, labour unions, the youth league, youth federation, youth associations and the Women's, Children's and Youth Affairs Office itself) that is dedicated to reducing harmful practices. For example, the youth league encourages young people to hold a weekly meeting to discuss SRH issues relevant to youth, such as child marriage, FGM/C and unintended pregnancy. Lastly, Hiwot Ethiopia is also helping youth clubs, such as the Nigat & Tesfa anti-AIDS and SRH club, to create awareness about SRH issues by providing training.

In Semera Logia, the Aramis youth volunteer club is working to end FGM/C and child marriage. Regarding the latter, a member of the club explained the following:

"If a person marries off his children under 18, he would be detained. He would also be fined ETB10,000. We are working in collaboration with the Sharia court. According to Sharia, a girl under 18 can't get married even if she wants to."

Faith-based organisations are also helping young people to escape child marriage. For example, according to one interviewee:

"...if an underage girl marries, Sharia court would be asked how the girl gets married while they are working there. They would be asked measures they take to prevent child marriage and how they failed to know the case."

Despite these examples of social actors and stakeholders taking action on the themes of youth rights, harmful practices, SGBV and unintended pregnancy, there are also instances of social actors or organisations that do not engage in such initiatives. In Asayita, for example, an informant states that the Women's, Children's and Youth Affairs Office does not take action:

"Many girls marry, but the women's affairs office did nothing. They don't even help girls. They don't help them when they see their first menstruation period. Girls might be bullied on their first menstruation period. So they might be forced to be absent from school. ...Girls only get information from media and schools. I don't think they are against these harmful practices."

6.3 LEGAL AND POLICY ENVIRONMENT

6.3.1 LAWS AND POLICIES

In Semera Logia and Asayita, FGM/C is not handled by Sharia law. It is dealt with by the state law. This gap is creating a conducive condition for the practice to continue in the area. There is a need to bring the two laws into agreement so that they can collaborate on efforts to end harmful practices.

6.3.2 AWARENESS OF LAWS AND POLICIES

Both youth and parents are now aware of the laws against child marriage and FGM/C, but youth are not keen on seeing strict implementation of the law because of the fear of embarrassing their parents if they take them to the police or to the courts. An IDI participant in Bahir Dar indicated that even if they knew the law, they did not want to act against their parents. They also thought that their parents always did things that were 'best' for their children.

Youth, parents and the community are aware that if a man commits violence against a woman (e.g. rape) and is reported to the police, he will be punished according to the law. On the other hand, there is a view that such laws are known only by professionals and not accessible to young people and the general public. For example, people are not sure about the types of punishment people who commit rape would receive.

6.3.3 ENFORCEMENT OF LAWS AND POLICIES

Study participants (FGD with boys, 15–19 years, Ensaro) argued that the existing laws were strict to prevent child marriage and FGM/C but were not seriously implemented because of the hidden nature of the practices. Some suggested that it would be better if these laws were included as part of the education curriculum so that young people would be exposed to them as part of their education. Some parents who participated in an FGD in Ensaro agreed that the law did not solve problems related to child marriage and FGM/C, since there was limited implementation at the community level. In Bahir Dar, in some communities (e.g. Addis Alem *kebele*) FGM/C is still common, though there have been efforts to educate circumcisers about its harmful effects on girls.

According to female caregivers who participated in an FGD in Ensaro, the law would be enforced if girls reported cases to legal bodies such as the police. Some went further by saying that raping girls is the same as killing, and the punishment should

be similar. However, the government often detains men who rape women. Sometimes community members try to interfere and prevent rapists from being punished. They approach the police and try to get a lesser sentence for the criminals. Such action has reduced the effectiveness of laws against SGBV.

Some underage girls took their parents to the local authorities and had their marriage cancelled. Some had their parents detained by the police; although the detention was only for a short time, the girl's right would at least be respected. Such girls would get the chance to return to school and build their future, according to one female informant in Bahir Dar.

On the other hand, some participants argued that no one was afraid and respected the law because the law was not strict. Offenders think they can handle the case with their money. There are also people with authority who help their relatives escape punishment. Girls participating in an FGD in Semera Logia said that rich people also used their wealth to escape the law.

Another problem is that the law requires a witness to come forward and give evidence when SGBV is committed. If girls do not have a witness, they cannot pursue the case. According to one of the participants, even if the officers caught a man beating a girl, they would not side with the victim:

"One day, the police caught him beating me. You know what he said? 'He wouldn't beat you. It might be your brother.' Why would my brother beat me? I am not his wife. We are not divorced, but I haven't forgotten what he said. We have no option than tolerating. We can't say there is a law."

Regarding the enforcement of laws and policies, one study participant stressed the need for a stricter implementation of the laws:

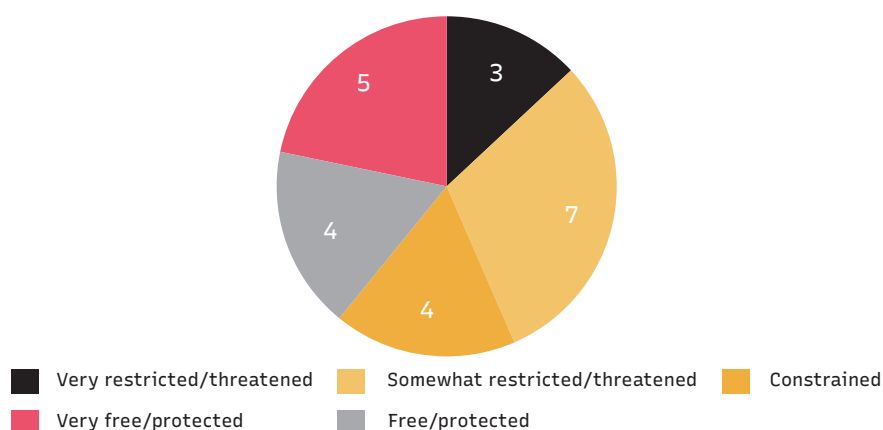
"No matter happens, the law should at least threaten potential perpetrators. What if he kills her? They should at least threaten him. Law is what we have next to God, right? So, what is the point of refraining by telling that we would get back to you soon? If someone is found guilty, that person should be punished. For example, if we report at night, they should detain both of us until the next morning. Then, they should check everything and decide. There was a woman in my place of birth. Her husband killed her. They caught the knife he used to kill her. Their child also reported that his father killed her. However, they said that he is not guilty. It has been seven or eight years since she died. Her parents did not even get her corpse. They used to fight a lot."

7. FINDINGS: CIVIC SPACE

Through the online civic space survey, the study explored the participants' perspectives on the State's respect for human rights and fundamental freedoms. These perspectives were found to be very diverse (Figure 19).

Around a third of the participants (7/23) reported that the State's respect for human rights and fundamental freedoms was somewhat restricted/threatened in Ethiopia. On the other hand, 5 of the 23 participants thought that the State's respect for human rights and fundamental freedoms was very free/protected. Four of the participants thought that the State's respect for human rights and fundamental freedoms was free, while the same number reported it to be constrained, and three considered it very restricted/threatened.

Figure 19: Youth and CSO advocates' assessment of the State's respect for human rights and fundamental freedoms in Ethiopia (n=23)



7.1 CORE COMPONENTS OF CIVIC SPACE

In this baseline study, civic space was analysed in terms of the following basic components: freedom of information and expression; freedom of assembly and association; financial security and accountability; and consolation and dialogue. Below, each topic is discussed based on data obtained from the online survey.

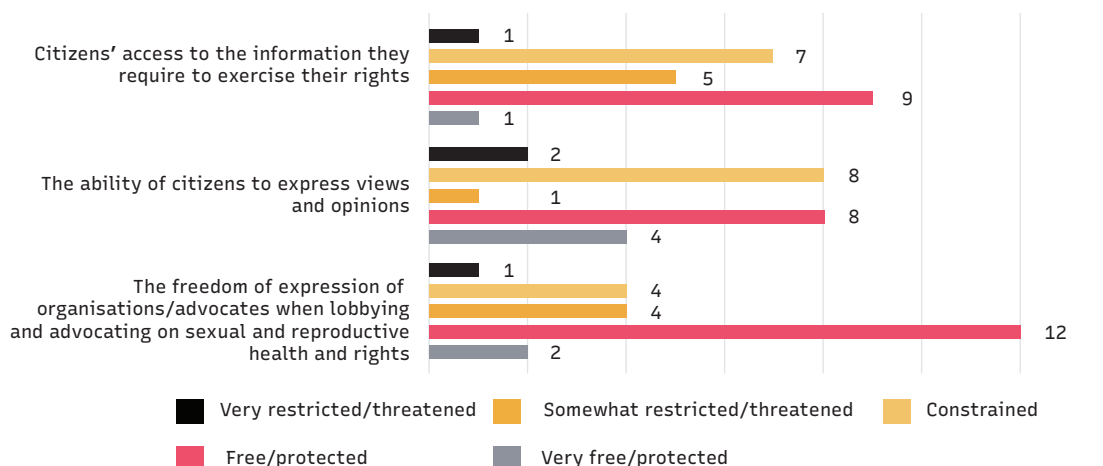
7.1.1 FREEDOM OF INFORMATION AND EXPRESSION

Respondents to the online civic space survey (youth advocates) had different views on the freedom of information and expression in Ethiopia. The findings suggest that these freedoms are stronger for organisations than for individual citizens.

Just over half (14/24) of the respondents rated the freedom of expression of organisations or advocates to lobby and advocate on SRHR as (very) free or protected.

However, when asked about citizens' ability to express their opinions and views, only 12 considered this ability to be (very) free or protected. A lower number still (10/23) rated citizens' access to information to exercise their rights as being free (Figure 20).

Figure 20: Youth and CSO advocates' assessment of different aspects of freedom of information and expression in Ethiopia (n=23)



Qualitative narratives indicated that the practical room for action and manoeuvre for citizens and CSOs for information and expression could differ depending on their role. As the following quotes show, CSO were perceived to have more freedom to speak than civil servants:

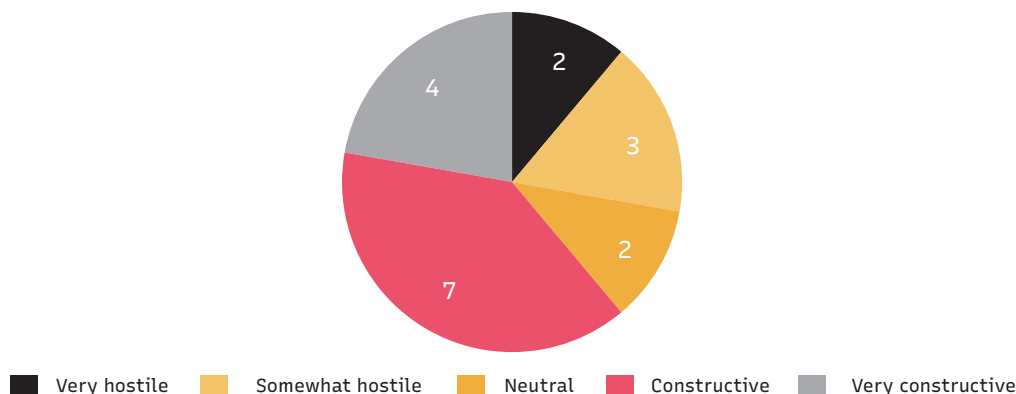
"Yes. As you know, civil society organisations have the freedom to speak. If you are a civil servant, you might be afraid of losing your job. So, you wouldn't dare to speak. Unlike that, CSOs speak freely," (KII, youth coordinator, Bahir Dar)

"CSOs are free to work. We work in collaboration with women's league and women's association. The youth associations teach the community in marketplaces and during holidays. They teach in the form of dramas and other activities." (SSI, women's federation CSO, Semera Logia)

Role of the media in lobbying and advocacy

Youth advocates discussed a variety of topics on (social) media platforms or channels, including eliminating child marriage, reducing teenage pregnancy, addressing SGBV, improving SRH service delivery and comprehensive sexuality education. Half of them considered that the interactions with the public on media platforms or channels were (very) constructive, while the other half rated them as (somewhat) hostile (Figure 21).

Figure 21: Youth and CSO advocates' assessment of interactions with the public on media platforms/channels (n=19)

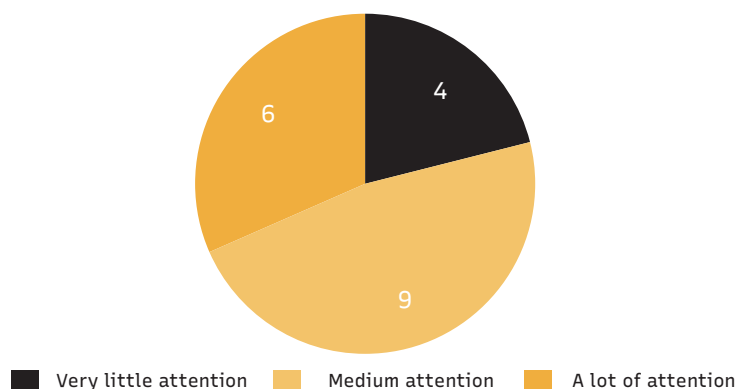


Moreover, participants stated that there could be difficulties especially related to the cost of using media to communicate the work that organisations do:

"Media usually present things that you know. If you ask them to broadcast an event, they ask you to buy airtime and cover their per diem. The woreda's communication office should cover their cost, but they don't. So you don't present your case. Even though the community shouts about the problems, no one broadcasts the event." (KII, disability association, Ensaro)

The youth advocates surveyed considered that the media did pay attention to the issues of harmful practices (child marriage and FGM/C), SGBV and unintended pregnancy (Figure 22).

Figure 22: Youth and CSO advocates' assessment of the level of media attention paid to Power to You(th) core issues (n=19)



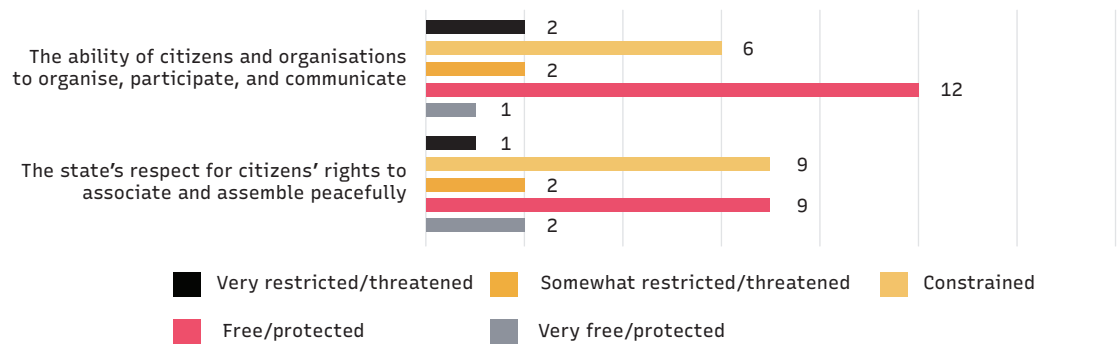
Social media are used by 11 out of 19 youth advocates for lobbying and advocacy (11/19). Facebook was the most mentioned (12), followed by Telegram (7) and YouTube (4). Twitter, Instagram, WhatsApp and TikTok were each only mentioned by one respondent as being used for lobbying and advocacy.

These youth advocates considered that social media were the most influential type of media in shaping public opinion on harmful practices, SGBV and unintended pregnancy (reported by 11/19). Some respondents also referred to television (6/19) and radio, books or magazines (5/19 each). The influence was generally considered positive. For social media, two respondents said the influence was negative, and two said that it was neutral. When asked which groups were the main target audiences of the media considered influential on these issues, the most common reply was ‘young people.’

7.1.2 FREEDOM OF ASSEMBLY AND ASSOCIATION

Youth advocates’ views on the freedom of assembly and association were also diverse. A slight majority considered that citizens and organisations had the freedom to organise, participate and participate. At the same time, a slight majority also reported that the State’s respect for citizens’ right to associate and assemble peacefully was restricted (Figure 23).

Figure 23: Youth and CSO advocates’ assessment of different aspects of freedom of information & expression in Ethiopia (n=23)



When asked about the main restrictions that limit the freedom of assembly and legitimate protest, seven respondents referred to the costs and requirements for authorisations, and six to the criminalisation or punishment of certain activities. Five responded that there were no restrictions, but three reported the use of violence, repression and policing. On the question of which groups had most difficulty gathering and organising, nine respondents referred to young people. Other responses such as

LGBTQI+ groups, religious groups or none were chosen by three respondents each, and women's rights groups and indigenous or other minorities by two respondents each.

7.1.3 FINANCIAL STABILITY AND SECURITY OF CIVIC SOCIETY

Lack of budget is the most common challenge facing CSOs in Ethiopia. The problem is most visible in youth-led CSOs. Some individuals/government bodies consider that young people do not work seriously; thus, they will not assist them financially. There are also CSOs that do not work closely with the government and whose activity is not visible in the community. Thus, they may not gain attention and enough support from the government. The Power to You(th) officer in Semera Logia stated that the budget issue would not be a major problem if the organisations worked properly:

"There are many CSOs here, but they don't work as strong as their objective. When I ask some of them, they told me that there is resource limitation. There are many CSOs in our area, but I haven't seen them working seriously. They say that they are not able to mobilise resources. If you don't have enough resources, you can't do well." (SSI, Power to You(th) officer, Semera, Logia)

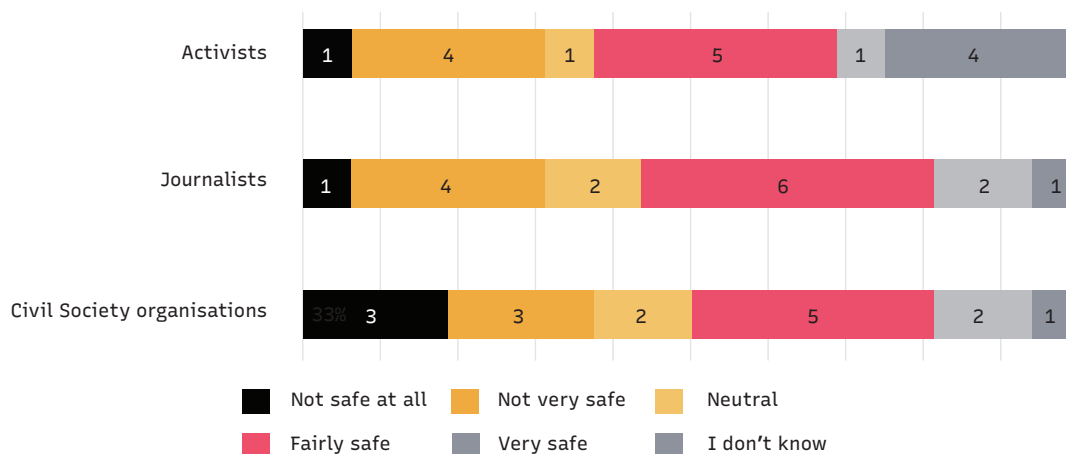
Another issue covered by the online civic space survey was whether there were government mechanisms or initiatives providing financial support to organisations working on SRHR. Seven of the 17 respondents said there were, while six said there were not, and the other four did not know.

With regards to the security of CSOs, most respondents said that there was not much of a problem as long as they worked on predefined goals. However, there were cases of nearby officials telling CSOs to act only according to their needs:

"We are not getting any type of support from the Woreda. Government bodies are stressing us. They tell us that we have to work as they like." (IDI, youth club member, 20–24 years, Asayita)

Also in the online survey a slight majority of the respondents rated the safety of activists, journalists and CSOs working on SRHR as (fairly) safe (Figure 24).

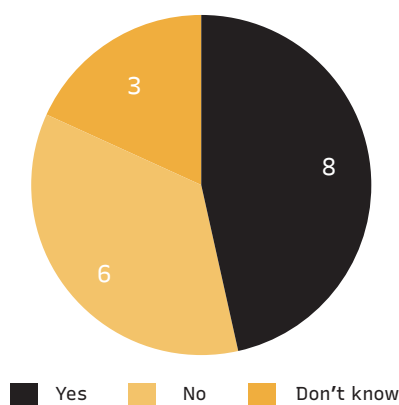
Figure 24: Youth and CSO advocates' assessment of safety levels of those working on SRHR in Ethiopia (n=16)



7.1.4 DIALOGUE AND CONSULTATION

Some participants indicated that CSOs could access information about government actions and decisions if they asked through the proper procedure. In some cases, representatives of CSOs are invited to participate in discussions and decision-making process. As Figure 25 shows, some respondents to the online survey also stated that CSOs and advocates were engaged by government for meaningful consultation on policies relating to harmful practices, SGBV and/or unintended pregnancy.

Figure 25: Youth and CSO advocates' views on whether or not CSOs/advocates are actively engaged by government for meaningful consultation on policies relating to Power to You(th) core issues (n=17)



When describing how these organisations are involved, the responses were: invited to comment on draft policy documents (5), attend policy consultations (5), and jointly organise activities at the national/local level (6).

When rating the dialogue between the organisations in which respondents to the online civic space survey were involved and the government, the responses (out of 17) were: constructive (7), tokenistic (5), regular (4), and irregular (2). No one considered it hostile. On whether those spaces engaged a diversity of civil society actors, most said that was the case (10/17).

Dialogue and consultation are becoming common among citizens, CSOs and government representatives. CSOs that accept the culture and values of the community and work seriously can be consulted and be part of different meetings and dialogues. In some areas, representatives of CSOs are invited to participate in discussions and in the decision-making processes.

"Nowadays, the youths are encouraged to be part of different associations, and the number of CSOs increases from time to time. However, the organisations should work based on their predefined strata of the community." (KII, Women's, Children's and Youth Affairs Office representative, Ensaro)

The following quotes illustrate this situation:

"In Afar region, there are youth-based associations called Fema. It is stratified based on age and gender. These associations have their own cultural skills of problem-solving. They solve their problems using these skills. Our role is adding a few things. We help them to set agendas, have regular meetings and prepare specific plans. We formalise and modernise their actions and build their capacity." (SSI, Power to You(th) officer, Semera Logia)

"Yes, we participate in such meetings. However, we face some problems from the society. Different people claim their clan members should participate in the meeting, and they feel they are not getting the chance on purpose, but we explain and try to convince them by telling the truth. We also present this idea at the meetings as well." (IDI, boy, 15–19 years, Semera Logia)

7.2 LOBBYING AND ADVOCACY ENVIRONMENT FOR CSOs

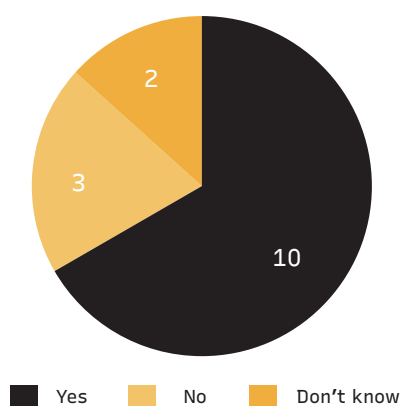
It is evident that there are conducive and detracting environments for CSO lobbying and advocacy:

“There is lack of flexibility between the governmental and non-governmental organisations. Even though both organisations have the same aim, they don’t work together. Amref is doing well on this regard. Hiwot Ethiopia is also following Amref’s path. Other NGOs are not flexible. They only work according to their project. In addition, they are only working on youth clubs. They should also work on other youth structures and committees. The other thing is that most members of youth clubs are students, and they don’t work on Weekdays. Another problem is that youth would start participating in clubs when they are grade 12 students. Then they would leave the club when they join universities. So we are trying to make them members since their childhood.” (KII, government representative, Ensaro)

7.2.1 AVAILABILITY AND USE OF EVIDENCE

Participants were asked whether there was enough evidence available to assist lobbying and advocacy efforts on SGBV, child marriage, FGM/C and unintended pregnancy. As shown in Figure 26, two thirds (10/15) of the participants reported that there was enough evidence, while three said there was not. Participants were also asked about the types of evidence that are most effective when seeking to influence policymaking.

Figure 26: Youth and CSO advocates’ assessment of the level of evidence available to assist lobbying and advocacy efforts



7.2.2 CHALLENGES AND OPPORTUNITIES FACED BY CSOS

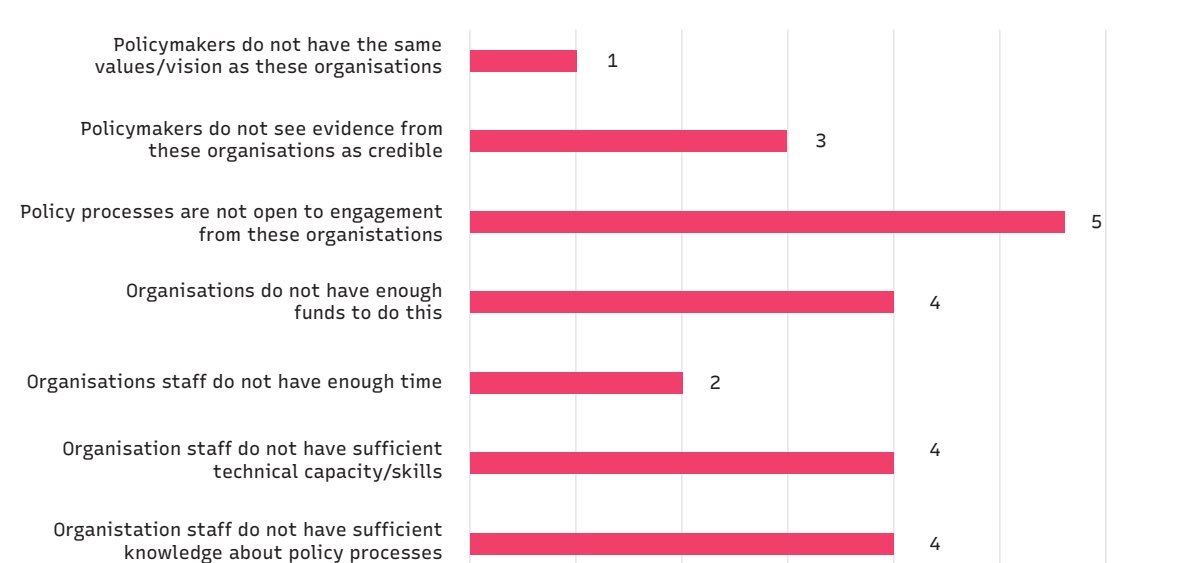
Participants said that there were challenges and opportunities for CSOs in Ethiopia. Some of the challenges mentioned were a lack of budget, poor CSO coordination, and poor coordination and flexibility between the government and NGOs. In general, limited budgets and administrative capacities are the main challenges for most CSOs. The following narratives explain the situation:

"I think CSOs don't have other restrictions other than the budget. Even if CSOs plan to address youth-related issues, there are different barriers, including roads and transportation. If they want to go and teach in the rural areas, they might need a car. If you have the capacity, you can do it. However, most CSOs don't have the capacity." (KII, disability association representative, Ensaro)

"Our club doesn't have a generator and speaker. Speakers help us to attract people with music and dance. If we don't have speakers, we can't attract people. We also go to rural areas to teach communities. However, there are frequent power cuts. So it is difficult to address our goal/mission. The other challenge is a lack of cloth that represents the nation, nationalities and people of Ethiopia. We only have cloth that represents the culture of Ensaro. This also hinders our work." (IDI, young woman youth member, Ensaro)

The results of the online survey also point to the obstacle of policy processes not being open to the engagement of CSOs (Figure 27).

Figure 27: Obstacles to CSO engagement in policy processes

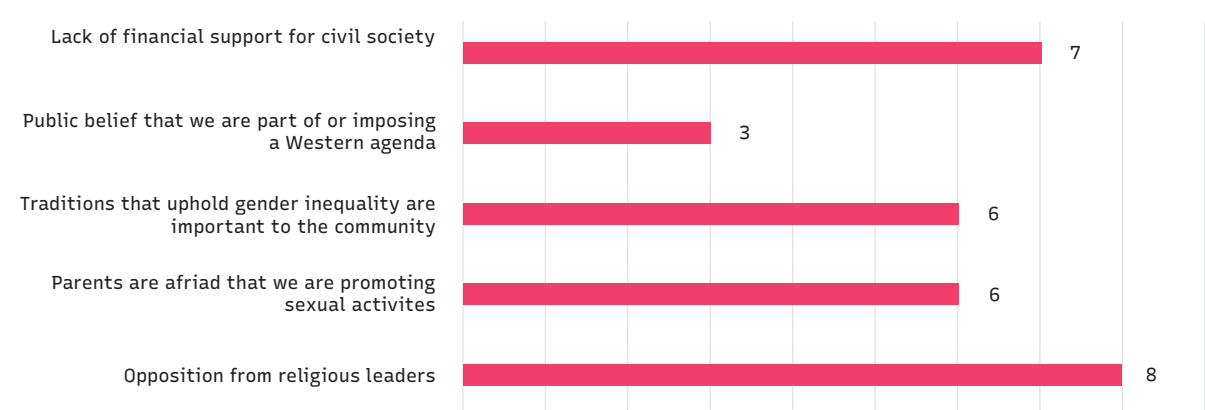


Youth-based CSOs have one major challenge in that most of their members are students; most students participate in clubs when they are in grade 12 and then leave when they go to university. Moreover, these students do not work on weekdays. This limits the clubs' activities to specific times and places. Therefore, there should be a mechanism to involve different age groups and young people from different backgrounds.

"Most members of youth clubs are students, and they don't work on weekdays. Another problem is that youth would start participating in clubs when they are grade 12 students. Then they would leave the club when they join universities. So we are trying to make them members since their childhood." (KII, Women's, Children's and Youth Affairs Office, Ensaro)

Moreover, as Figure 28 shows, besides the financial constraints, opposition from religious leaders, parents' fears that advocating for SRHR means promoting sexual activities and rooted and accepted gender norms are other challenges that CSOs face to build recognition and acceptance of their work on advancing SRHR.

Figure 28: Challenges to securing public support



The existence of an enabling policy framework is another key factor for the active involvement of CSOs in different activities. The recently revised Ethiopian CSO policy has opened up more space for such organisations. However, a Power to You(th) officer in Semera Logia argued that the policy had not clearly defined implementation strategies:

"In my opinion, the policy itself is problematic. Some say that there are problems of implementation, but the policy should also present implementation strategies. If a policy doesn't have implementation ways and strategies, the policy itself is problematic. If

there is no implementation strategy, it can't be fruitful. For example, child policy on harmful traditional practices says that it should be implemented by the government, but it doesn't state which part of the government is responsible. Then, it should go down to responsible departments. Each and every detail should be clearly stated." (SSI, Power to You(th) officer, Semera Logia)

Participants also mentioned some of the opportunities for CSOs working on youth and women's issues in Ethiopia. The government was considered to be doing some work related to women and youth, demonstrated by the creation of the Women's, Children's and Youth Affairs Office at the *woreda* level. The office was said to be trying to work in collaboration with stakeholders. The following two statements support this opinion:

"There is a committee that consists of culture and tourism office, justice office, and women's, children's and youth office. Health, education and communication offices are also part of this team. There are more than 10 institutions in the committee. They are trying to solve women's, children's and youth problems." (KII, Women's, Children's and Youth Affairs Office, Ensaro)

"There are different women led organisations like women's association, women's league, women's federation and youth clubs. There are efforts from government and non-government organisations. Some changes are observed. There is a good start, but there is also a gap. Gender issues need more attention. There are few women, who break the culture and become role model for others. However, these women are few. So we need to work on such things." (SSI, Power to You(th) officer, Semera Logia)

8. DISCUSSION

In this section, key issues are highlighted that need further discussion and can be addressed by the Power to You(th) programme. These include gaps between youth knowledge about harmful practices and the actions they take to reduce them, youth clubs as platforms for imparting leadership skills to young people, the scope of civic space, laws and policies, and their implementation, and changes to and continuing practices of child marriage, FGM/C, SGBV and unintended pregnancy. These main reflection points are presented for each of the four pathways of the theory of change, with recommendations made for the programme.

Pathway 1: Young people demand accountability and responsiveness on key issues

Youth knowledge vis-à-vis youth engagement. Adolescents and young people, but especially the latter, have demonstrated good knowledge and understanding of harmful practices, SGBV and unintended pregnancy. However, their level of engagement so far to prevent these practices has not been in line with the high level of understanding they have exhibited. The range of actions they can take is affected by a number of factors, including the level of support they receive from parents, community leaders, teachers, health care workers and local officials.

While parents have increasingly become supportive of their daughters' education and are showing willingness to consider their daughters' choice of marriage, they are still reluctant to allow adolescent girls to participate in youth-led organisations (e.g. youth clubs), fearing that this might negatively affect their school performance. As we will conclude below, social and gender norms still favour boys over girls, if a programme only targets boys and girls—and not their surroundings and parents—change will not happen.

Youth clubs serve as platforms to exercise leadership where young people not only meet but also exchange views about how to develop leadership skills through interaction with their peers. In Semera Logia and, to some extent, also Asayita, youth clubs offer a setting where young people can escape the conventionally restrictive norms (when it comes to play, leisure time, friendship and discussion of SRH issues) and exercise their choices. Youth clubs offer opportunities for young people to exercise leadership and (gender) equality, which are generally limited in the community.

In Asayita, young people compete to serve on a youth parliament where elected young people come together to discuss various issues that affect them such as education, health and SRH. Being elected to and serving on a parliamentary platform gives young people confidence to actively participate in youth-led organisations and to engage in

activities to reduce harmful practices, SGBV and unintended pregnancy. Being in a leadership position opens the way for action.

Overall, a number of participants spoke of the skills and self-confidence gained from belonging to youth associations, and the benefits they derive from membership of a group or association, including solidarity and life skills. Some of their testimony suggests that well-conceived and implemented programmes led by young people can have transformative effects. There is a need to build the capacity of such youth-based associations in terms of the human resources through periodic training or additional recruitment and financial resources.

Other than youth platforms (whether formal or informal), a thorough and high-quality curriculum-based sexuality education programme can help adolescents and young people navigate a range of conflicting and confusing messages that they receive daily about SRHR issues. Most schools and universities in Ethiopia have some type of HIV/AIDS education or intervention programme in place, but such programmes are often narrow, weak or unevenly implemented without addressing wider SRHR issues. It is, therefore, high time to consider introducing comprehensive school-based sexuality education, and the Ministry of Health or Ministry of Women's and Social Affairs and other stakeholders need to engage with the Ministry of Education to move forward in this direction. Effective behaviour change communication strategies should also be designed to reach out-of-school adolescents and young people.

Pathway 2: CSOs amplify young people's voices to claim, protect and expand civic space

Scope of civic space. In Ethiopia, there is a clear political commitment to expand civic space. This has been demonstrated by the revision of the previously restrictive CSO policy and the creation of the Women's, Children's and Youth Affairs Office all the way to *woreda* level, although the structure is not uniform in all regions of Ethiopia. Qualitative evidence from the baseline study indicates that CSOs have freedom of information, assembly and association as long as they follow the proper procedures. In some study sites (e.g. Ensaro), representatives of CSOs are invited (as committee/taskforce members) to participate in local government decision-making processes. In other areas of concern, practical room for information, assembly and association is limited due to a lack of commitment/understanding from the local leadership. Most CSOs often face resource constraints to perform their work, though, in some cases, the government has schemes to provide financial support to CSOs working on SRH issues.

Broader collaboration among CSOs, involving joint assessment of needs and opportunities, agreement on how the efforts of different organisations can complement each other and joint evaluation and learning, is necessary. Coordination and collaboration among different actors will ensure that limited resources are used equitably and reach those most in need. With effective leadership and the involvement of all stakeholders—more importantly, adolescent and young people—more coherent and equitable provision of SRHR services can be delivered. It is, therefore, imperative to develop and refine coordination and collaborative initiatives with state and community actors providing SRHR services.

Pathway 3: Social actors support and promote youth rights and progressive social norms

The wider community still demonstrates social norms that restrict girls' participation in community activities. Girls who are seen going out and mixing with boys might be considered poorly socialised and ill-mannered. Such negative community attitudes tend to have a negative impact on action that young people are likely to take against child marriage, FGM/C, SGBV and unintended pregnancy. While state actors such as teachers, health care workers and local officials encourage young people to take action to prevent harmful practices, the influence of parents and the community remains, as they themselves live in and are members of the community.

Changes and continuing practices. Obvious changes are observed in the practices of child marriage and FGM/C in particular. Parents and the community understand that it is illegal to perform FGM/C on a newborn baby girl or force an underage daughter to marry someone she does not like. The community no longer endorses child marriage officially. Young people are refusing marriage proposals arranged by their parents.

On the other hand, child marriage and FGM/C—and also SGBV and unintended pregnancy—are continuing. In rural Ensaro, parents still marry off their underage children, and the practice is also present in the urban areas of Bahir Dar. In Asayita and Semera Logia, child marriage is practiced in some fashion within the tradition of *absuma*—that is, young people are encouraged to marry their relatives or members of their clan.

We should, therefore, acknowledge complexity, ambiguity, ambivalence and contradiction in these issues and the actors involved in the lives of young people. This has implications for the present programme, meaning that norm change cannot be imposed on people from above or by interventions, but must be owned, constructed and reconstructed by the bearers and believers of the norm system.

Pathway 4: State actors improve policymaking, budgeting and implementation at the local, national, regional and global levels regarding harmful practices, SGBV and unintended pregnancy

Ethiopia has a favourable legal and policy environment to prevent harmful practices, SGBV and unintended pregnancy. Both the federal and the regional constitutions have outlawed child marriage, FGM/C and other harmful practices. The country has signed and ratified many conventions on harmful practices and sexual violence at both the regional (e.g. the African Charter on the Rights and Welfare of the Child) and the international level (e.g. the United Nations Convention on the Rights of the Child).

In 2020, the former Ministry of Women's, Children's and Youth Affairs (recently renamed the Ministry of Women's and Social Affairs) introduced the national costed roadmap to end child marriage and FGM/C (2020–2024) in Ethiopia. Thus, there is as such no lack of law or policy/strategy to prevent harmful practices; the challenge is to take these laws and policies down to the local level so that they are effectively enforced. Here, two main hurdles exist: deliberate evasion (by parents and the community) of laws preventing child marriage and FGM/C, and a lack of seriousness on the part of law enforcement officials.

Sustaining and increasing dedicated leadership and political will with the full and active participation of civil society, multilateral and bilateral partners and the private sector is likely to prove most effective. There is a need for renewed attention to the situation of adolescents and youth—and, particularly, adolescent and young women. Laws and policies that protect women and girls against sexual violence, disinheritance and gender discrimination of all kinds, including harmful traditional practices and sexual violence within and outside marriage, are in place in Ethiopia, but they need to be publicised and strictly enforced. For proper enforcement, such laws and policies must be accompanied by adequately funded social mobilisation campaigns, which should involve adolescent and youth networks and organisations with all other elements of civil society in their planning and implementation. As the segment of the society disproportionately affected by SRHR issues, women must be adequately represented in the formulation of policies and strategies and decision-making.

The respondents (both civil society actors and young people) spoke of budget constraints as one of their challenges. What is more concerning is that a lot of SRHR programmes are still donor-dependent; given that external funding is gradually drying up, even sustaining the gains made is a cause for concern. Budgetary constraints in the aftermath of sanctions related to the ongoing war, and volatility in the global economy because of COVID-19 are threatening hard-won gains and underscore the need to maximise efficiency in how SRHR programmes are funded and implemented.

In an era dominated by economic crises and fiscal constraints, SRHR programmes focused on adolescents and youth need to be strongly underpinned by smart investment that enables them to reap enormous human, economic and social benefits. More effort needs to be made to increase domestic financing through public–private and philanthropic partnerships and initiatives. There is a need to engage in advocacy to increase domestic resources and sustain the momentum. It is only diverse funding sources, including increasing domestic financing, that will in the long term create the means for delivering SRHR interventions to increasing numbers of people. Over many years, SRHR, gender and HIV programmes in Ethiopia have benefited greatly from innovations in prevention and care (such as the use of health extension workers, the health development army, *Idirs* and other community-based organisations), and there is a need to sustain or revitalise such innovative and community-driven approaches.

Lastly, the study shows that there is space and willingness to implement a rights-based approach. Space and awareness are there, but an important structural factor that limits access to SRHR services is whether adolescents and youth see the SRH services provided by different agencies or NGOs as a right that they can claim. We need to acknowledge that in a context of limited and uncertain provision, people lack the confidence to press for their rights. Clients who are surer of their rights and more confident that they will not be penalised if they claim them can contribute to improving access to SRHR services and the quality of their provision, particularly in situations of severe resource constraints.

Acknowledging complexity. The issues being discussed are diverse, and the geographic locations covered by the baseline study are also diverse, suggesting that no single prescription can apply to all these diverse issues and societies. Thus, recommendations made to address these issues should appreciate such complexity, which will call for interventions that capture the broader picture of the problem. Behavioural interventions should take into account contextual or structural issues that may enable or hamper adolescent and youth well-being and access to SRHR services. These include scrutinising gender power relations, the impact of poverty and unemployment, stigma and discrimination, and traditional practices. Care should be taken to avoid trying to implement one-size-fits-all recommendations, as the context differs across different SRHR issues, and there are differences in capacity, assets and sites, although there are cross-cutting challenges faced across the issues and sites. It is such complexity and contradiction that helps explain why there is no direct positive relationship between knowledge of SRHR issues and youth engagement or practice (the findings of this baseline study).

9. CONCLUSION AND RECOMMENDATIONS

9.1 CONCLUSION

The Power to You(th) programme aims to promote adolescents' and young people's meaningful engagement in discussions and decisions related to SRHR around harmful practices, SGBV and unintended pregnancy. This baseline report presents the situations of adolescents and young people in four programme intervention areas (Bahir Dar and Ensaro in Amhara, and Semera Logia and Asayita in Afar), focusing on their knowledge, experience and actions taken to prevent harmful practices, SGBV and unintended pregnancy, as well as their willingness to take action to prevent these practices in the future.

The results of the baseline study in Ethiopia show that adolescents and young people demand an increased/expanded role in preventing harmful practices (child marriage and FGM/C), SGBV and unintended pregnancy, and that parents, representatives of the State, CSOs and NGOs, as well as religious and community leaders should involve young people in discussions and decisions related to SRHR issues. Adolescents and young people, for their part, have been diversifying their engagement as leaders and members of youth clubs, school clubs and self-help voluntary associations. However, the effectiveness and impact of young people's engagement depends on the level of support (e.g. moral encouragement, youth leadership training and modest budgetary provisions) they receive from parents and community, state and NGO actors.

The four intervention sites also exhibited some variation in terms of adolescents' and young people's meaningful engagement in activities aimed at preventing harmful practices, SGBV and unintended pregnancy. In areas where young people tended to actively participate in youth-led organisations (e.g. Bahir Dar in Amhara and Asayita in Afar), the study participants reported a relatively higher level of engagement than in the sites (e.g. rural Ensaro in Amhara and urban Semera Logia in Afar) where the presence of youth clubs does not appear to be strong. Strengthening existing youth-focused organisations and encouraging and supporting young people to establish new ones which will allow them to express their perspectives on SRHR freely and take action to prevent harmful practices, SGBV and unintended pregnancy will be important components of the Power to You(th) interventions in Amhara and Afar.

9.2 RECOMMENDATIONS

Based on the baseline study findings of the Power to You(th) programme, the following recommendations are made, taking into consideration the four pathways of the theory of change.

Pathway 1

- Adolescents and youth already have knowledge about the key Power to You(th) issues. The programme can strengthen their knowledge about rights related to SRH.
- Besides knowledge on Power to You(th) key issues, skills-building on advocacy, communication and leadership is also important.
- Create opportunities and spaces for adolescent and youth participation in community activities on Power to You(th) key issues. There is little experience but considerable willingness.
- Expand adolescent and youth participation beyond awareness-raising activities and beyond community level.
- Youth clubs are important structures for youth voice and agency, but primarily at an individual level. These spaces/structures need to foster more collective action.

Pathway 2

- Encourage and facilitate adolescent and youth engagement with CSOs, particularly beyond youth clubs.
- Use social media as one of the main platforms to amplify adolescent and youth voices and facilitate their engagement in lobbying and advocacy.
- Coordination between CSOs should be strengthened.
- Address funding and time limitations affecting CSOs, especially youth-led ones.
- Coordination/flexibility between CSOs and government actors was also mentioned as a challenge and, thus, should be improved.

Pathway 3

- Expand the currently limited spaces for exchanges and collaboration between adolescents and youth and adults.
- Address the diversity of attitudes among social actors. Health care workers and teachers are already supportive of young people's agency and right to SRH services.
- Awareness-raising among parents on youth rights is needed, with attention to topics such as consent and the difference between being consulted and deciding.
- Address/discuss perceptions of adolescent and youth capabilities to take decisions.

Pathway 4

- Increase the engagement of young people with state actors or in policymaking.
- Facilitate information about budgeting and accountability mechanisms.
- Support the implementation of the existing legal and policy framework on harmful practices.

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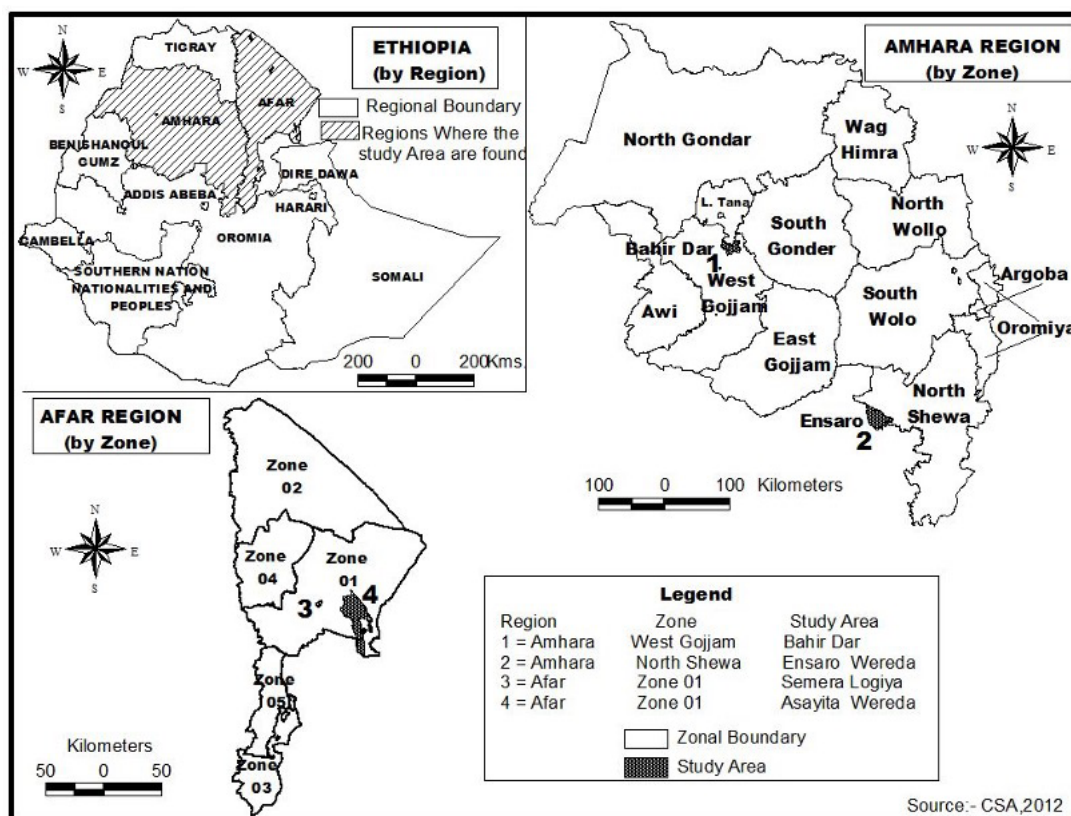
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11. ANNEXES

ANNEX 1. LOCATION MAP AND DESCRIPTION OF THE STUDY AREAS

Figure 29: Location map of Power to You(th) Ethiopia baseline study areas



Bahir Dar city, the seat of the Amhara regional state, is the largest urban centre in the region with a population of 218,429 inhabitants in 2020/21 (<https://all-populations.com/en/et/population-of-bahir-dar.html>). The city houses government agencies (e.g. the state government), business establishments (e.g. hotels and resorts), education institutions (e.g. Bahir Dar University and many private colleges), industries (e.g. Bahir Dar textile factory) and NGOs (e.g. Plan International Ethiopia). The city is divided into six sub-cities (plus three satellite *kebeles*), each of which is further divided into sub-districts or *kebeles* (the smallest administrative unit). Most of the data collection took place in the following five sub-cities: Fasilo, Aste Tewodros, Dagmawi Menelik, Belay Zeleke and Shum Abo.

Ensaro is a *woreda* in the most south-westerly part of North Shewa zone. It has a population of 35,348 people in 14 *kebeles*, according to the Ensaro *woreda* plan commission office. Although all the *kebeles* are considered rural, Ensaro town serves as the seat of the *woreda* administration. Crop farming and animal production supplemented by micro and small businesses (mainly in Ensaro) are the main

economic activities for the people of Ensaro. Amref and Hiwot Ethiopia are the two NGOs which have been present in the area in recent years. Data were collected from Ensaro 01 and Geza Washa Salayish *kebeles*.

Semera Logia is one of the two baseline study sites in Afar. These are two cities (situated 7 km apart from each other), with Semera being the new administrative and political capital of Afar, and Logia serving as a business centre. For administrative purposes, the two, having a combined estimated population of 300,000 people, are considered one city, divided into Semera and Logia sub-cities. Government offices (e.g. Women's, Children's and Youth Affairs Office, Education and Health Bureau) and NGOs (e.g. Amref) are located in Semera, while most business activities are found in Logia. Both quantitative and qualitative data were collected in Semera and Logia.

Asayita is a district located 75 km east of Semera and used to be the capital of Afar region before regional government offices moved to Semera in 2007/08. The *woreda* has 17 *kebeles* (five of which feature urban characteristics), with Asayita town being seat of the *woreda* administration. The main economic activities include micro and small businesses (e.g. shops, restaurants, coffee shops) in and around Asayita town, while inhabitants of the rural *kebeles* are engaged in pastoral and agro-pastoral livelihood activities. The *woreda* is characterised by a significant presence of non-Afar groups, including Amhara, Oromo, Gurage and Tigrawi. Data were collected from Asayita town and the surrounding rural *kebeles*.

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