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# Almost all girls were cut in her Ethiopian village. Not anymore, thanks to her.

## PROGRESS WATCH

Bogaletch Gebre cofounded an organization that’s credited with virtually eliminating female genital mutilation in the part of southern Ethiopia where she grew up. A key reason for the organization’s success has been its focus on ‘community conversations.’

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**JANUARY 26, 2017  ADDIS ABABA, ETHIOPIA**—Bogaletch Gebre remembers the day when she was cut in her village in southern Ethiopia. It was the 1960s and she was about 12 years old. Residents called the rite of passage “cleansing the dirt”; today it is commonly known around the world as female genital mutilation (FGM).

“My sisters, mothers, friends were crying,” Ms. Gebre recalls. “My mother was really agonized. ‘I wish they would do away with it,’ she said. She didn’t want to do it, but she felt she had to.” Gebre nearly bled to death, and it took her two months to recuperate.

At the time in this predominantly Christian country, nearly every girl underwent FGM. “My parents did it simply from misconception and misunderstanding. They thought it was mandated by religion. They didn’t even know where it comes from,” Gebre says.

When she was growing up, FGM was a taboo subject – even though her older sister died during childbirth because of complications from the FGM she underwent as a girl. It wasn’t until decades later as a graduate student in the United States that Gebre learned more about what had happened to her and her family.

When Gebre found out that FGM is a needless, harmful practice, she became incensed. She eventually left her PhD program in epidemiology at the University of California, Los Angeles, and in 1995 she returned to Kembata Tembaro, her home region in Ethiopia. In 1997, she and her younger sister started KMG, a nonprofit whose initials stand for [Kembatti Mentti-Gezimma-Tope](http://kmgethiopia.org/our-story-2/" \t "_blank), which means “women of Kembata working together.” The organization aims to end FGM and help girls, women, and the rural poor.

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Today, KMG is credited with virtually eliminating FGM in Kembata, a region of 680,000. A key reason for its success has been its focus on “community conversations,” giving residents a chance to think through the issues.

Seated in her office in Addis Ababa, Ethiopia’s capital, Gebre wears an elegant silk scarf and dark glasses because of an eye impairment. “We cannot be mutilated alive in the 21st century,” she declares forcefully. “There should not be any culture or religion that puts us in that position. It should not be allowed in any name to demean our humanity or women’s personhood.”

In 30 countries around the world, at least 200 million girls and women alive today have undergone FGM, [according to UNICEF](https://www.unicef.org/media/files/FGMC_2016_brochure_final_UNICEF_SPREAD(2).pdf). More than half of them are from Egypt, Indonesia, and Ethiopia.

FGM is practiced by both Muslim and Christian communities, although neither the Quran nor the Bible mentions it. The procedure is traditionally considered necessary for a girl or woman to eventually marry.

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As a child, Gebre defied expectations that girls shouldn’t go to school. She demanded admission into her local school where girls weren’t allowed after a certain age. Eventually she won a government scholarship to attend the only girls’ boarding school at the time in Addis Ababa. From there, she won another scholarship to study physiology and microbiology at the Hebrew University of Jerusalem. In Israel, Gebre saw that “volunteerism is part of the life of young people. They are engrossed in the country’s problems from a young age,” she says.

Gebre then went to the University of Massachusetts Amherst as a Fulbright scholar and earned a master’s degree in parasitology and protozoology. She says it was in the US that she first experienced racism and sexism when an adviser blocked her from attending a conference.

At first, a skeptical audience

In 1998, Gebre gave her first talk about FGM at her childhood church to a shocked audience. Although people were skeptical at first, it was vital that Gebre was from the community and highly respected.

KMG also gained trust by first addressing people’s practical problems, such as helping to repair a broken bridge.

It took several years for Kembata residents to start changing their minds about FGM. Gebre worked to make a personal connection. “I tell them my own story – how I grew up, went to school, how I struggled, and how I was mutilated,” she says. “I am from them. I speak from reality. I touch their reality.”

In 1999, nearly 97 percent of people surveyed in Kembata supported FGM, according to figures [in a UNICEF study](https://www.unicef-irc.org/publications/pdf/iwp_2009_07_rev.pdf). Yet by 2008, less than 5 percent said they supported the practice. Hundreds of thousands of girls have avoided FGM.

Most of KMG’s work is now outside Kembata in the Oromia region and the Southern Nations, Nationalities, and Peoples’ Region. According to the organization, almost 4 million people have benefited from its programs to end FGM and empower the rural poor.

Change is happening across the country, even in areas where KMG does not work. Other entities focusing on FGM include United Nations agencies, religious groups, government health workers, and other local nonprofits, as well as international ones.

Overall in Ethiopia, the prevalence of FGM has dropped from 74 percent in 2005 to 65 percent, according to a 2016 government report. The percentages refer to the proportion of females between 15 and 49 years old who were cut.

In 2013 the Ethiopian government launched a national plan to stop FGM. It also pledged to end the practice by 2025 at the 2014 Girl Summit in London.

“KMG has been credited with a major decline in FGM cases through public mobilization against harmful traditional practices,” says Tsehay Gette, program officer at the UN Population Fund in Addis Ababa. “KMG Ethiopia has achieved great success in helping the public realize the need to ban the cruel practice of female circumcision. More than 2,000 trained facilitators are active in numerous communities,” says Ms. Gette, who commented via email.

How community conversations work

Indeed, KMG has based its work on community conversations. Every two weeks, groups of 50 people voluntarily meet in their villages to talk about social issues and problems. KMG’s facilitators guide conversations between women, men, young, old, educated, and illiterate alike.

They take up topics seldom discussed in public, including FGM, domestic and sexual violence, bride abduction, and exorbitant dowries. Over time and with new information and interactive discussion, people change their minds and agree to new community bylaws prohibiting harmful traditional practices.

“Community conversations can work anywhere where human beings live together,” Gebre says. “It’s a matter of listening to each other, respecting each other’s opinion, and understanding the phenomenon of human rights.”

In 2002, the first uncut girl got married in Kembata in a public ceremony attended by some 3,000 people. In 2004, KMG held a similar celebration attended by 100,000 people. This is now an annual festivity, although KMG had to shelve the 2016 celebration after Ethiopia declared a state of emergency in October because of civil unrest.

One woman’s positive experience

Mihret Ayele, who is in her late 20s, says her parents learned more about FGM through community conversations. As a result, she is the only one of her parents’ three daughters who was not cut. Ms. Ayele’s husband also participated in community conversations. “For this reason he knew how much FGM is bad,” Ayele says. She adds that she gave birth to her two children quickly and without complications, which she attributes to being uncut.

“KMG saved a lot of people from FGM. Women’s rights were not respected in this area before KMG,” Ayele says. “There are a lot of changes. Women’s rights are being respected now. KMG provided a lot of training.”

KMG’s work is multifaceted. Gebre recounts how the group educated some women about their legal rights. “After their training, they asked me, ‘OK, now we have resources. When my husband beats me, do I ask him to give me money to go to the police station?’ ”

Consequently, KMG started programs to show women how to raise livestock and operate small cooperatives to give them some economic independence.

Could lessons from KMG work in other countries where FGM is still pervasive? So far, representatives from six African countries including Sudan, Kenya, and Somalia have visited KMG for training, Gebre says.

But foreign funding has diminished since the 2008 financial crisis and also after donor governments shifted their priorities. In spite of such challenges, Gebre sees KMG’s work as far from over. She thinks constantly of the girls still at risk, not the hundreds of thousands who have been spared FGM because of KMG’s efforts. “Even one girl’s life lost hurts me,” she says adamantly. “Often I don’t see what I have achieved. I see what I haven’t achieved yet.”

• *Reporting for this piece was facilitated by a grant from the Pulitzer Center on Crisis Reporting.*