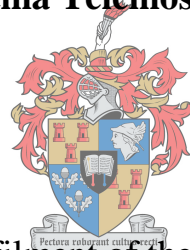


**The Role of the Church in Ending Female Genital Mutilation/Cutting in order
to Promote the Flourishing of Women:
A Case Study of the Wolaita Kale Heywet Church, Southern Ethiopia**

By

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Thesis Presented in Partial Fulfilment of the Requirements for the Award of
Master of Theology Degree in Practical Theology (Community Development)
with a Special Focus on Gender, Health, and Theology
at the University of Stellenbosch



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March 2018

Declaration

By submitting this thesis electronically, I declare that the entirety of the work contained therein is my own, original work, that I am the sole author thereof (save to the extent explicitly otherwise stated), that reproduction and publication thereof by Stellenbosch University will not infringe any third party rights and that I have not previously in its entirety or in part submitted it for obtaining any qualification.

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Abstract

Female Genital Mutilation/Cutting (FGM/C) is the most harmful traditional practice (HTP) when it comes to affecting the flourishing of women in Wolaita, Southern Ethiopia. This study is motivated by the need to end FGM/C in Wolaita, where it has higher rates when compared to other parts of the country. The study aims to interrogate what role the Wolaita Kale Heywet Church (WKHC) plays - or can play - in ending FGM/C and promote the flourishing of women in Wolaita and beyond. The study is positioned within the field of Theology and Development with a focus on the intersection between gender, health and theology. It discusses FGM/C, the use of its terminology, the nature of the practice from a public health perspective, the consequences of FGM/C for health, how FGM/C is perceived in Africa, the prevalence of FGM/C in Ethiopia, and the governmental measures for its eradication.

The findings indicate that FGM/C constitutes all procedures that involve partial or total removal of the external female genital or cause damage to the female genital organs for non-medical reasons. It was further noted that the practice causes severe consequences for health with physical complications and psychological problems. The study also found that health workers are involved in performing FGM/C, although the practice is mainly carried out by traditional practitioners. Motivations for the practice are complex and interrelated, perpetuated by gender inequality and used as a means to control women's sexuality in patriarchal societies such as those found in Southern Ethiopia. Based on the findings, the study explores, the notion of flourishing as a theological lens and valuable theory in the struggle against FGM/C and argues for greater engagement with African Feminist theology as embodied theology at the intersection of gender, development and theology. The study concludes with recommendations that would help the church to effectively eradicate this HTP in concerned areas.

Opsomming

Vroulike Genitale Mutilasie (vroulike verminking van geslagsdele)/ Sny (VGM/S) is die mees skadelike tradisionele praktyk (STP) wanneer dit kom by die floring van vroue in Wolaita, Suid-Ethiopië. Hierdie studie word gemotiveer deur die behoefte om VGM/S in Wolaita te beëindig, waar dit hoër syfers het in vergelyking met ander dele van die land. Die studie ondersoek watter rol die Wolaita Kale Heywet Kerk (WKHK) speel - of kan speel - om VGM/S te beëindig en die floring van vroue in Wolaita verder te bevorder. Die studie word geïnterdisiplinêr binne die veld van Teologie en Ontwikkeling, met die klem op die interseksie gevind in die studie van geslag, gesondheid en teologie. Dit bespreek VGM/S, die gebruik van terminologie, die aard van hierdie praktyk vanuit 'n openbare gesondheids perspektief, die gevolge van VGM/S vir gesondheid, die persepsie VGM/S in Afrika, die voorkoms van VGM/S in Ethiopië, en die regeringsmaatreëls vir die uitroeiing daarvan.

Die bevindings dui aan dat VGM/S alle prosedures behels, wat gedeeltelike of totale verwydering van die eksterne vroulike genitale of skade aan die vroulike geslagsorgane vir nie-mediese redes veroorsaak. Daar is verder bevind dat die praktyk ernstige gevolge vir die gesondheid het, wat fisiese komplikasies en sielkundige probleme veroorsaak. Die studie het ook bevind dat gesondheidswerkers betrokke is by die uitvoering van VGM/S, hoewel die praktyk hoofsaaklik deur tradisionele praktisyne uitgevoer word. Motiverings vir die praktyk is kompleks en interafhanklik, voortgesit deur ongelykheid tussen geslagte en word gebruik om vroue se seksualiteit in patriargale samelewings soos dié in Suider-Ethiopië te beheer. Op grond van die bevindinge, ondersoek die studie uiteindelik die idee van floreer as 'n teologiese lens en waardevolle teorie in die stryd teen VGM/S en argumenteer vir groter betrokkenheid by Afrika-feministiese teologie, as beliggaamde teologie gevind in die interseksie van geslag, ontwikkeling en teologie. Die studie sluit af met aanbevelings wat die kerk sal help om hierdie STP effektief uit te roei.

Dedication

This thesis is dedicated to my dear wife and life partner, Beronica Yohannes Yoseph, who refused to go through FGM/C when she was 5 years old. She became a role model, in this regard, for her siblings and other girls in her community in Wolaita, a place where the prevalence of FGM/C is very high. Beronica, you have been and will always be my inspiration in my engagements and struggle against FGM/C. This, I do to promote the flourishing of women in Wolaita and beyond.

Acknowledgement

I would like to express my appreciation and gratitude to my supervisor Prof. Nadine Bowers Du Toit for her support and guidance in writing this thesis. She has been a great support from its conception to completion. She encouraged me to keep working even when I was away from Stellenbosch for the last eight months. Prof, I still remember what you said when I was leaving and yes, “it is doable”. I also thank my co-supervisor Dr Elisabet le Roux for her support and vital comments on this work.

My special thanks go to my wife and life partner Beronica Yohannes Yoseph for her love, support and patience throughout this academic journey. Beronica, thank you very much for inspiring me to engage in this research topic. You are my inspiration and pillar of strength.

I also thank Marie and Prof. Edward H. Schroeder (Professor Emeritus of Systematic Theology), Prof. Eric Eisenstein (Professor in the Medical School at Duke University), Prof. James Michael Wyss (Professor of Cell, Developmental and Integrative Biology, Medicine, Neurobiology and Psychology at the University of Alabama) and all Crossings family for helping me in various ways including finance and prayers. Without all of you, this thesis, would simply never have been completed. Words are not enough to express my sincere gratitude.

I am equally grateful to the Church of Sweden for their generous financial support to complete this study. In the same vein, I would like to thank Prof. Charlene van der Walt and Dr Selina Palm, the former and current Coordinators for the Gender, Health and Theology at Stellenbosch University, respectively.

Finally, I thank the Wolaita Sodo University, Ethiopian Graduate School of Theology, and Wolaita Evangelical Seminary for allowing me to use their books and libraries for my studies. I’m also thankful to the Wolaita Kale Heywet Church and its leaders, especially Bereket Tasew, Siltanu Shiferaw, and Meseret Yoseph, for sharing documents and literature for my studies. A big ‘thank you’ also to the Ethiopian Kale Heywet Church Women Ministry, the Women and Children’s Affairs department/bureau of the Wolaita Zone, the Norwegian Church Aid and Kembatti Mentti Gezzimma (Kembatta Women Standing Together) for sharing their research and publications with me during the process of this study.

Abbreviations and Acronyms

AACC	All Africa Conference of Churches
AIDS	Acquired Immuno-Deficiency Syndrome
AKLDP	Agriculture, Knowledge, Learning, Documentation and Policy
ATRs	African Traditional Religions
CBOs	Community Based Organizations
CCAWT	Circle of Concerned African Women Theologians
CCDP	Children Care Development Project
CEFM	Child, and Early and Forced Marriage
CSA	Central Statistical Agency
DRM	Disaster Risk Management
EATWOT	Ecumenical Association of Third World Theologians
ECC	Ethiopian Catholic Church
ECFE	Evangelical Churches Fellowship of Ethiopia (ECFE)
EDHS	Ethiopian Demographic and Health Survey
EECMY	Ethiopian Evangelical Church Mekane Yesus
EGLDAM	Ye Ethiopia Goji Limadawi Dirgitoch Aswogaj Mahiber (National Association for the Elimination of Harmful Traditional Practices in Ethiopia)
EIASC	Ethiopian Islamic Affairs Supreme Council
EKHC	Ethiopian Kale Heywet Church
EKHCDC	Ethiopian Kale Heywet Church Development Commission

EOTC	Ethiopian Orthodox Tewahedo Church
ESDAC	Ethiopian Seventh Day Adventist Church
FBOs	Faith Based Organisations
FFW	Food for Workers
FGD	Focus Group Discussion
FGM/C	Female Genital Mutilation/Cutting
GBV	Gender Based Violence
HEWS	Health Extension Workers
HIV	Human Immunodeficiency Virus
HTPs	Harmful Traditional Practices
IAC	Inter African Committee
IRCE	Inter-Religious Council of Ethiopia
KMG	Kembatti Mentti Gezzimma (Kembatta Women Standing Together)
KNH	Kindernothilfe
MFI	Microfinance Institutions
MNP	Micro Nutrition Powder
NCA	Norwegian Church Aid
NCTPE	National Committee for Traditional Practices in Ethiopia
NGOs	Non-governmental organizations
SHGs	Self-Help Groups
SIM	Sudan Interior Mission

SLD	Sustainable Livelihoods Development
SNNPR	Southern Nations, Nationalities, and Peoples' Region
TDA	Terepeza Development Association
UN	United Nations
UNICEF	United Nations Children's Fund United Nations
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
WASH	Water Sanitation and Health
WCC	World Council of Churches
WHO	World Health Organization
WKHC	Wolaita Kale Heywet Church

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Chapter One

Introduction

1.1. Introduction

This chapter has nine main sections aimed at introducing the study. The first section highlights the problem statement and the focus of the study. The second section explains the motivation of the study while the third section discusses the relevant literature explored prior to the actual study. The fourth and fifth sections deal with the research question and objectives of the study respectively. In the sixth section, the research methodology and research approach are discussed. The seventh section explains the ethical considerations as well as the limitations. The eighth section highlights the potential impact of the study and its relevance in various spheres of influence including the academia while the last section presents a brief background information with regard to the contextual positioning of the study.

1.2. Problem Statement and Focus

This study mainly focuses on the role of the Church in ending Female Genital Mutilation/Cutting (FGM/C) to promote the flourishing of women with a focus on the Wolaita Kale Heywet Church (WKHC) in southern Ethiopia. FGM/C is one of the harmful traditional practices that affect the flourishing of Wolaita women. It is argued that the flourishing of women plays a major role in the flourishing of the entire community. This explains why matters pertaining to the health and wellbeing of women are among the key global issues for development (Mwansa, 2017).¹ In view of this, I share the opinion according to which FGM/C “cannot be seen in isolation of other harmful traditional practices and the general issues of gender and development” (Norwegian Church Aid, 2009:4). In Wolaita, the government of Ethiopia and non-governmental organisations are trying to address the issue of FGM/C but there is still a gap with regard to the Church’s response. According to the United Nations Children’s Fund (2013:72), “variations in prevalence among people of different faiths demonstrate that Female Genital Mutilation/Cutting is a challenge for all religious

¹ Mwansa, L. M. 2017. Investing in Girls and Women’s Education, a key to Sustainable Development!!! [Online]. Available from: <http://paf.org.zm/2017/03/investing-in-girls-and-womens-education-a-key-to-sustainable-development/?v=70f73ee5133f> Accessed [2017, 12 May].

groups in affected countries”. In this regard, “[r]eligious leadership may have to further engage in understanding FGM/C in their communities to promote a change in the practice” (United Nations Children’s Fund, 2013:72). Therefore, this study explores the role that WKHC plays to end FGM/C and promote the flourishing of women in Wolaita and beyond.

1.3. Motivation

When writing about FGM/C as a person with male gender presentation, it is important to ask a question regarding the necessity of men’s engagement in the issues that affect the flourishing of women. Indeed, women are in a better position to speak about the issues that affect them, but this does not mean that men should keep silent regarding “women’s issues”. Issues affecting women concern all human beings. This is because, arguably, when women prosper, everyone – benefits from their success. It could, therefore, be argued that every human being has a moral obligation to actively participate in the struggle against harmful traditional practices that affect the flourishing of women. In this vein, irrespective of my gender presentation, I hope to contribute to the ongoing attempts by existing change agents in addressing the issues affecting women, in this case FGM/C, by talking with them (women), and not for them.

As it were, I am personally from Wolaita, Southern Ethiopia, and I used to work at the head office of the Ethiopian Kale Heywet Church (EKHC). My father died when I was 12 years old, and my mother raised me as a single parent. In my culture, it is considered shameful to be raised by only a woman (that is, mother alone). This is explained better by Jobo (2016:61) when affirming that “[t]raditionally, Wolaitas believe that females are incapable in child rearing”. This is because “[t]hey publicly criticise the action of child rearing by their own mothers” (Jobo, 2016:61). It is argued in various existing literature that FGM/C is one of the harmful traditional practices that affect the flourishing of women in Wolaita, and I can attest to that as a witness. Thus, having been raised by a widow, I stand with women to advocate Church’s engagement in the fight against FGM/C in an attempt to promote the flourishing of women in Wolaita and beyond.

Although the Ethiopian government has launched initiatives to address the issue of FGM/C, there is still a gap with regard to the Church. Since the Church is largely silent on this issue, some women in Southern Ethiopia think FGM/C is a biblical command and, therefore, should be practiced (cf.

Gebre 2016).² Many scholars and organizations (see for example Wilcox 2005, Norwegian Church Aid 2009, etc.) attempted to study FGM/C in Ethiopia but their studies are limited particularly on the question of exploring the role of the Church in the fight against FGM/C. Although, in the beginning, EKHC was involved in the fight against FGM/C, it now seems to be less involved. The WKHC has also limited efforts in addressing the practice of FGM/C. This explains why this study focuses mainly on the role of the Church in ending FGM/C in order to promote the flourishing of women especially in the WKHC, Southern Ethiopia.

1.4. Literature Review

FGM/C is not just a local, national or regional issue but also a global problem and concern. A 2013 report by UNICEF figures highlights that by then (that is, 2013) more than 130 million women living had experienced FGM/C. This amounts to over 3 million women experiencing FGM/C every year. At this rate, without intervention, up to 63 million women could experience FGM/C by 2050 globally (UNICEF figures, 2013 report). By definition, FGM/C could be described as the partial or complete removal of the external female genitals for cultural and traditional reasons and its origin is unknown (Burrage, 2016:16). FGM/C obliterates sexual pleasure, causes severe health problems and sometimes it causes death, but the practitioners still believe the procedure enhances the girl's health, hygiene, chastity, fertility and marriage prospects (Burrage, 2016:16).

Research conducted by the Ethiopian government discusses the fact that women and girls in Ethiopia continue to suffer because of the practice of FGM/C, particularly in Wolaita (Central Statistical Agency, 2016:45). This research highlights the ethnic groups that widely practice FGM/C. According to the 2016 Ethiopia Demographic and Health Survey, “[f]emale circumcision is most prevalent among the ethnic groups of Afar and Somali (98 percent and 99 percent, respectively), followed by Wolaita and Hadiya women (92 percent for both). Fifty-four percent of urban women are circumcised as compared to 68 percent of women in rural areas. Furthermore, according to the Central Statistical Agency (2016:45), FGC is less prevalent among women with higher education and those in the highest wealth quintile”. Therefore, FGM/C is a real problem that causes an adverse effect on the overall well-being of Wolaita women and girls.

² Bogaletch Gebre. 2016. Fighting FGM [Online]. Available from: <https://www.youtube.com/watch?v=NqQfRhshHtk> Accessed [2017, 12 May].

Nevertheless, the government of Ethiopia is playing a significant role in the effort towards ending the practice of FGM/C in Wolaita. The Office of Women and Children's Affairs of the Wolaita Zone (2016:3), for example, has done research to understand at what level Wolaita women's social, political and economic participation is affected by harmful traditional practices and specifically FGM/C. As a result of the study, the Women and Children's Affairs Office of Wolaita Zone identified eighteen harmful traditional practices that affect girls and women in Wolaita. Five of them (FGM/C, rejecting women's chance to inherit their parent's wealth, rape, polygamy, and marriage by abduction) are considered illegal in Ethiopia, but they are still practised in Wolaita (Office of Women and Children's Affairs, 2016:25-26).

According to the Women and Children's Affairs Office of Wolaita Zone (2016:17), FGM/C is the worst of the harmful traditional practices that are widely practised in Wolaita. In the case of girls aged 7 to 10, out of 901 girls studied, 690 girls experienced FGM/C – which, when calculated, amounts to 77%. Of the 445 girls studied between the ages of 11-14, 427 girls or 96% experienced FGM/C. In general, the research tells us that of 1346 girls, 1117 experienced FGM/C which is a total of 83% (Women and Children's Affairs Office of Wolaita Zone, 2016:39-40). It is, therefore, believed that more than 80% of women and girls in Wolaita experienced FGM/C.

This study by Women and Children's Affairs Office of Wolaita Zone is very important for those who want to do further studies on the practice of FGM/C in Wolaita (cf. Women and Children's Affairs Office of Wolaita Zone, 2016:7). This is because it suggests possible ways to address FGM/C and underlines that Faith Based Organisations (FBOs)³ should work to create awareness in society (Women and Children's Affairs Office of Wolaita Zone, 2016:10). As alluded to earlier, the study finds that, despite FGM/C's being an illegal practice in Ethiopia, it is still practised secretly in various places in the country, including in Wolaita. To make the practice private because of its illegal status in the country, the Wolaita people use different techniques to do FGM/C such as sending girls to other places (for instance, to their relative's home), and pretending that the girls are ill. At times, the practice is done during the night (often at midnight). Besides, spreading misinformation about FGM/C, merging the mutilation of boys with girls, and sometimes

³ Faith-Based Organisations (FBOs) include both local churches and Christian Non-governmental organizations (NGOs). Iftu Training, Research and Consultancy, 2017. *Concerted Efforts of Faith-Based Organizations to Abandon Female Genital Mutilation & Child Marriage in Ethiopia: A Consolidated Report*. Submitted to: Norwegian Church Aid, Addis Ababa, Ethiopia, 6.

the mother or father hiding the practice from the other parent are all techniques used by most Wolaita people considering the illegality of the FGM/C practice (Women and Children's Affairs Office of Wolaita Zone 2016:38). The main motivation for continuing the practice despite it being illegal as per the laws and regulations of the country is culturally grounded. According to Yahehyirad (2008:107), the Wolaita people believe the practice of FGM/C helps them to control women's sexual desires.

This study illuminates the misunderstanding that persists on the consequences of FGM/C among the Wolaita people. This could mean that the government has not done enough in creating awareness regarding FGM/C. Thus, the Church and FBOs should be actively involved in the fight against FGM/C and, by so doing, creates awareness for people to avoid its consequences.

In her book, *Cut Flowers: Female Genital Mutilation and a Biblical Response*,⁴ Sandy Wilcox (2005: ii) attempted to answer why change has been so slow with regard to the church's response to FGM/C and found that "there is a bias towards this country, but what happens in Ethiopia seems to be representative of what happens in other parts of Africa" (Wilcox 2005:9). Wilcox wrote this book when she was living in Ethiopia. Wilcox attempted to challenge the Ethiopian culture by applying biblical principles to the practice of FGM/C and argued that "to cut a flower is to destroy something that God has given us to enjoy but to cut a person means to mar something that is a reflection of God himself" (Wilcox, 2005:1).

Wilcox (2005:1) insists that Christians, organisations, and governments should act as change agents in bringing cultural change so as to eliminate the scourge of FGM/C. In short, the book tries to answer very important questions such as: "What is this practice of cutting the sexual organs of the female body? Why is it so prevalent in Africa? Why is it so resistant to change? Does the Bible say anything about it? Is it ethical to try and change a deeply rooted cultural practice?"

The other key research on this issue is conducted by Norwegian Church Aid (NCA). The NCA works in Ethiopia based on its continuing competence, commitment, and strong partnerships with churches, the Ethiopian government and other development partners in the country: "Ethiopia is a

⁴ This book is printed first in 2005 (English) and then translated and printed in other Ethiopian languages: in 2006 (Amharic), 2007 (Hadiya), 2009 (Wolaita), 2009 (Oromia). Wilcox, S. 2005. *Cut Flowers: Female Genital Mutilation and a Biblical Response*. SIM Press: Addis Ababa, Ethiopia.

pilot country for Norwegian Female Genital Mutilation/Cutting action and, reportedly, hosts the highest number of projects” (Norwegian Church Aid, 2009:8). NCA has been involved in the struggle against harmful traditional practices (HTPs) since 1999. It is also engaged in the abandonment of FGM/C since 2002 (Norwegian Church Aid, 2009:3). According to Norwegian Church Aid (2009:10), HTPs such as FGM/C are linked to Gender-Based Violence:

NCA posits that gender-based violence is a gross violation of women and girls' security and rights, and it hinders equal opportunities and the full participation of women in society. Gender-based violence is often closely linked to cultural or religious traditions. Therefore, churches and other faith communities can play a key role by changing their own traditions and by challenging society to denounce this form of violence.

The NCA played a positive role in addressing FGM/C and other HTPs in Ethiopia and it is believed that “tangible achievements have been made in the fight against FGM/C in the last two decades. NCA is clearly perceived as a well-established, trustworthy and reliable partner by the government, NGO and other partners in Ethiopia” (Norwegian Church Aid, 2009:84).

In the same vein, Wilson (2004:280) notes that there are two issues which continues in Africa: FGM/C and sexual violence against women. These two are interrelated. Wilson (2004:284) further indicates that “while women are becoming increasingly aware of the negative physical and psychological effects of female genital mutilation, it continues because of its religious values”. This explains why FGM/C should also be studied and understood from a religious point of view. It should be noted that the practice of FGM/C has been condemned by women outside Africa in various international bodies and reports, however, African women have not raised a unified voice against this practice (Wilson 2004:281). In view of this, Hirut Terefe (2012:11) finds that FGM/C must be studied from a gender perspective. It is clear, therefore, that FGM/C intersects Gender, Health and Theology and affects the flourishing of women in various ways.

David Kelsey (2008:2) defines “to flourish” in a twofold sense: “to blossom” and “to thrive”. First, “to blossom” is to manifest beauty by providing “fruit” (for present neighbours) and “seed” (for future neighbours). Second, “to thrive” is to have oneself in hand (the sociality and responsibility). Marais (2015:129) notes that “Christian theology faces two challenges today: responding to the violation of the dignity of human beings and ecology, and affirming that God’s power does not

negate human and ecological flourishing”. She, therefore, argues that our Christian theology needs three things: expressing the glory of God, manifesting beauty, and “eccentric flourishing” in order to respond to the two challenges.

For both Kelsey and Marias, flourishing is eccentric (that is, having your centre outside yourself). However, I am less convinced with the notion of “eccentric flourishing” because African women find their centre in their own experience not just outside of themselves, and they do theologies with their whole beings. In this prospect, Rakoczy (2004:19) describes how African women do theologies:

In a public lecture at the University of Toronto in 1988, Mercy Amba Oduyoye was asked by a man in a very aggressive tone, ‘Where are the writings of African women theologians?’ She replied that first African women do theologies with their bodies: fetching water over long distances, chopping wood for a fire to prepare food for the families, working in the fields – and in the homes of the middle-class and upper-class. These actions of care and concern are the first theological voices of African women.

In his book, *Body Theology*,⁵ Nelson (1992:52) also indicates that “the human body is language and a fundamental means of communication. We do not just use words. We are words”. Furthermore, Rakoczy (2004:93) notes that “some of the women who participated in the study did demonstrate a confidence in their own experience and a willingness and desire to keep searching for God as their lives unfolded...One woman stated that ‘God becomes part of your experience, this makes God real’”. Christian theology becomes feminist theology when it takes a special interest in the lives of women, their stories, their hopes, their flourishing and failures, and their complex experiences of oppression (Jones, 2000:14). Thus, as women searched Jesus at the tomb, African women are still searching for the real God through their own experience. However, FGM/C is affecting women and the body that they use to do theology.

1.5. Research Question

The aim of this research is to interrogate the role of the Church in ending Female Genital Mutilation/Cutting and promoting the flourishing of women, with a special focus on the Wolaita

⁵ Nelson, J. B. 1992. *Body Theology*. Westminster/John Knox Press, Louisville.

Kale Heywet Church, Southern Ethiopia. In so doing, the research will attempt to answer the following question:

How can the Wolaita Kale Heywet Church engage in the struggles against Female Genital Mutilation/Cutting in order to promote the flourishing of Wolaita women?

1.6. Objectives

1. To discuss Female Genital Mutilation/Cutting as perpetuated by culture and its consequences for health within the context of Wolaita, Southern Ethiopia
2. To argue for the theological notion of flourishing as relevant to Gender, Health, and Development discourse
3. To explore the current programmes of the Wolaita Kale Heywet Church in relation to Gender, Health, and Theology
4. To recommend possible ways for the Wolaita Kale Heywet Church to address Female Genital Mutilation/Cutting

1.7. Research Methodology and Approach

This study focuses mainly on the role of the Church (in this case the WKHC) in the struggle against FGM/C. Some of the sources for the study lies within the official documents on policy, reports and minutes of the WKHC. Therefore, a documentary analysis approach has been taken regarding this study. The document analysis defines the document's context, type, features, and its relationship. Since FGM/C is a sensitive issue the document analysis approach helps to surmount the ethical challenges of doing observations and interviews (Silva, 2012:141). This study assesses the official documents of the Ethiopian Kale Heywet Church (EKHC), especially the WKHC. The WKHC development department and women's ministry are the primary focus of the study. Moreover, the study uses literature studies to explore the theological lens of the WKHC development programmes and its relationship with Gender and Health issues.

1.8. Research Ethics and Limitations

This research includes both document analysis and a literature study, therefore, the ethical guidelines that were used for this study required asking for official permission from the EKHC and the WKHC to access and use the available materials in their archives such as reports, minutes,

etc. The document analysis method helps to overcome the ethical challenges of doing observation and interviews on FGM/C, which is sensitive issue – particularly for a male researcher (cf. Silva, 2012:141).

It should be noted that this study was done through document analysis and literature studies because of the short period of time that is given to complete the MTh with a focus on Gender, Health, and Theology. It is, therefore, difficult to do field work within such a limited period of time. The other limitation is that the study focuses just on the WKHC and I am originally from this congregation. Doing research as an insider has both advantages (maybe an insider researcher has a better knowledge than the outsider researcher) and disadvantages (it may lead to being subjective).

Nevertheless, according to Silva (2012:141), a research has two limitations when it is done through document analysis. The first limitation is that every document has its own identity and specific context, however, a researcher may arrive at a biased and selective (or wrong) understanding. The other limitation is the assumptions that the authors determine whether to record and leave out information. However, the study attempts to overcome these limitations by analysing other documents (documents from the government, and NGOs) in addition to the WKHC documents (Dora, 2017:12).

1.9. Potential Impact

It is hoped that this study will assist the Church in Ethiopia and Africa at large to take a leading role in ending FGM/C to promote the flourishing of women. The study will increase the minimal literature that is available on the practice of FGM/C from a theological perspective. It is expected that church leaders within different church's structure (from the local church to the head office level), para-church organisation, the academy, community leaders, and other governmental offices that address the issues of gender, health, and development will respond to the findings and recommendations of this study. The study has the potential to lead in the process of ending the practice of FGM/C to promote the flourishing of women as FGM/C is linked to the issues of gender, health, and development.

In the longer-term, the impact of this study will be the flourishing of all human beings since the flourishing of women is the base for the flourishing of the whole community life. The Church will be able to accomplish the Biblical obligation and mandate for engaging the issues of gender, health, and development such as ending FGM/C – the practice that violates the dignity and the rights of women.

1.10. Positioning of Study within Practical Theology

The aim of this thesis is to discuss the intersection between gender, health, development and theological aspects of FGM/C using the principles of feminism from the perspective of practical theology. According to Reader (2008:8), there are three emerging themes in practical theology such as blurring of boundaries (contemporary practical theology is an emancipatory or transformative discipline), the tension between enclosures and thresholds, and theological reflections and reflexivity. This study is positioned in the spheres of theological reflections and reflexivity. Since traditional Christian theology is the product of male hands, hearts, and minds, women must look beyond the traditional Christian theology to see if and how they can develop their experiences to do theology in a different way (Young, 1990:52-3).

Women's experience is one of the vital interpretive categories in both feminist theory and feminist theology. This is why Hogan (1995:17) asserts that “[When we put] women's experience at the center of feminist thoughts we will begin to transform our epistemology by placing questions of what constitutes knowledge, how it is produced and who produces it”. But this does not mean feminist theory is reduced to women's experience. Rather, “Feminist theology operates, at the most basic level, as a theology born out of women's experience of oppression under patriarchy and out of engaged action for change” (Hogan, 1995:16). Nevertheless, FGM/C affects the flourishing of women and their experiences to do theology in a different way. Thus, this study attempts to address FGM/C as it fits into the Gender, Health and Theology intersection.

The Church has both the mandate and obligation to serve as a worthy and valued agent for community development in order to transform the society (August, 2010:44). A holistic biblical definition of development brings the transformation of both individuals and institutions, so we can live in *shalom* with God, other people, ourselves and with the whole creation (Bowers Du Toit, 2010:433). FGM/C is one of the general issues of gender and development (Norwegian Church

Aid, 2009:4). Therefore, the Church should take a leading role in promoting the flourishing of women by ending FGM/C. The process of conscientization assists women engage in the struggle against FGM/C. Although conscientization is key concept in a practical feminist theology, the process of conscientization is very painful because it helps a woman realize the extent to which her life has been affected by FGM/C and, as Wootton (2000:19) rightly puts it, it also helps her recognize how she has contributed to the crushing of other women by perpetuating FGM/C.

1.11. Key Contextual Positioning

1.11.1. Ethiopia

It cannot be overemphasised that Ethiopia is the only un-colonized country in Africa. At the 120 years of Adwa Victory celebration (2016), Thabo Mbeki, Former President of South Africa, stated the following:

Here is a major Battle. Europeans met in Berlin in 1884 & 1885 and decided to chop up the continent [Africa]. Ten or Eleven years later, Ethiopians win in Adwa which is in direct contradiction and direct conflict with what is decided in Berlin, Africa must be colonised. Ethiopians said Africa will not be colonised and succeeded. Therefore, they communicated a message to all Africans, the fact that Europeans met and took the decision in Berlin does not mean we [Africans] agree.⁶

Ethiopia also has a strong claim to being the oldest country in the world due to its geological and human foundations (Henze, 2000:1). It is a multi-ethnic, multi-religious, and multilingual country located in the Horn of Africa. Based on the UN estimate for 2016, the current total population of Ethiopia is over 101.8 million people, and that makes it the second most populous country on the African continent after Nigeria. The country has more than 80 ethnic groups whose culture are very rich and diverse. The current Ethiopian government uses a federal government system to govern its nine regional states and two city administrations (Ifu Training, Research and Consultancy, 2017:5).

⁶ Thabo Mbeki, Former President of South Africa, speech in the 120 years of Adwa Victory celebration [Online]. Available from: https://www.youtube.com/watch?v=624BaD6wKIQ&feature=player_embedded Accessed [2017, 2 March].

1.11.2. The Southern Nations, Nationalities, and Peoples' Region

The Southern Nations, Nationalities, and Peoples' Region (SNNPR) is one of the regional states in Ethiopia. SNNPR has 14 zones, 4 special *woredas*⁷ and one city administration. The city administration is located at Hawassa, the capital city of the regional state (Tesfaye et al., 2015:2). In SNNPR, fifty-six ethnic groups live together, and they have their own cultures, traditions, and languages which makes the region a “mosaic of peoples and cultures” (Tesfaye et al., 2015:2). The types and number of HTPs vary among these ethnic groups. According to the 2007 Population and Housing Census of Ethiopia, the total population of SNNPR is 14,929,548, out of which, 7,503,630 are females and 7,425,918 are males (Federal Democratic Republic of Ethiopia Population Census Commission Central Statistical Agency, 2010:7).

1.11.3. Wolaita

The term ‘Wolaita’ is a name for both the people and area in SNNPR. In his book, *The History of Wolayta People*, C. H. Stinger (1910:32) argues that the Wolaita people lived independently from the Stone Age as being organized in the socio-political and economic realm of life (Stinger, 1910:32). Emperor Menelik II used a huge military campaign and conquered Wolaita at the end of the nineteenth century. Following the conquest, the kingdom of Wolaita united into the Ethiopian empire (Alemayehu, 2012:2). However, the kingdom of Wolaita lived for centuries before the conquest and its administrative area was much bigger than the current geographical location (Balisky, 1997:14).

The Wolaita zone is one of the fifteen zones in SNNPR, covering the size of 4400 km². The capital, Wolaita Sodo town, which is located 330 km far from Addis Abba and/or 160 km from Hawassa, is the administrative centre of the region. Wolaita zone comprises 12 *woredas* and 3 town administrations. According to the 2007 Population and Housing Census of Ethiopia, the total population of Wolaita zone is 1,501,112, out of which, 761,579 are females and 739,533 are males. About 88.5% of the population (that is 1,328,598) reside in the rural areas of the zone, whereas, only 11.5% live in the town (Federal Democratic Republic of Ethiopia Population Census Commission Central Statistical Agency, 2010:8).

⁷ Woreda is an administration level in Ethiopia above Kebele and below Zone.

Based on the 2007 Census, the population of Wolaita comprises different religions distributed thus: 1,070,895 Protestant; 315,360 Orthodox; 80,338 Catholic; 9,291 Islam; 8,867 traditional; and 16,361 others (Federal Democratic Republic of Ethiopia Population Census Commission Central Statistical Agency, 2010:204). According to Wolaita Zone Finance and Economic Development, “Wolaita is situated approximately 2000 meters above mean sea level and its altitude ranges from 700 to 2,900 meters. The area is divided into three agro-ecological zones: Kola (lowland <1500m), Woina Dega (mid-altitude 1500-2300m), and Dega (highland >2300m). Most of the area lies within the mid altitude in the Zone. The Zone has different climate conditions suitable for diverse agricultural production” (Mega, 2017:39).

1.12. Chapter Outline

Chapter 1 – Introduction: This introductory chapter begins with a presentation of the research problem and focus. It explains the motivation and how it is related to the practices of FGM/C in Ethiopia - particularly in Wolaita. After reviewing relevant literature from different sources and exploring the research question, the chapter attempted to discuss the objectives of the study, the methodological process, the limitations of the study, as well as the positioning of the study within Practical Theology and key concepts.

Chapter 2 – Female Genital Mutilation/Cutting and Its Consequences for Health: This chapter focuses on FGM/C and its consequences for health. This includes the use of terminology, the nature of the practice from a public health perspective, and the consequences of FGM/C for health (both the physical complications and psychological problems). It also includes how FGM/C is perceived in Africa and its prevalence in Ethiopia as well as the governmental measures for its eradication.

Chapter 3 – Flourishing at the Intersection of Gender, Health, and Theology: This chapter explores the notion of flourishing as a theological lens and valuable theory in the struggle against FGM/C. The chapter discusses the term flourishing, the source of human flourishing, and the centrality of human flourishing, African Feminist theology as embodied theology, which include both an African critique of eccentric flourishing and flourishing as critique of dualistic notions of salvation, and the flourishing of women in the Ethiopian context (*Maccasaa Zookissuwa*). The chapter also explores how flourishing as a holistic understanding of salvation interconnected with

the embodied approach of African Women Theologians at the intersections of gender, development and theology.

Chapter 4 – Wolaita Kale Heywet Church and Female Genital Mutilation/Cutting: This chapter explores the WKHC and its efforts with regard to Gender and Development and FGM/C in particular. The chapter also discusses the broader context of Ethiopia with regard to the marginalisation of women and harmful traditional practices (HTPs). It also looks at the Ethiopian Kale Heywet Church (EKHC) and its engagement in the fight against FGM/C. This is followed by a more in-depth exploration of the context of the region of Wolaita, the Wolaita Kale Heywet Church, Terepeza Development Association (the former Wolaita Kale Heywet Church Development Programmes) and its efforts. Thereafter, as the sections highlights the Women Ministry in the Wolaita Kale Heywet Church. The third and last part discusses the approaches of other churches and FBOs engagement in the fight against FGM/C in Ethiopia.

Chapter 5 – Key Findings, Recommendations and Final Conclusions: This chapter concludes the study by summarising each chapter in the first section before presenting key research findings. The chapter also gives some recommendations with regard to the role that the church can play in ending FGM/C in an attempt to promote the flourishing of women in Wolaita and beyond. It should be noted that the recommendations of this study are largely directed to the Ethiopian Kale Heywet Church, the Wolaita Kale Heywet Church (including both the Development arm and Women Ministry), and Wolaita men. The last section of this chapter highlights the conclusions that can be drawn from the study.

1.14. Conclusion

This introductory chapter attempted to introduce the entire thesis, which focuses on analysing the role of the Church in ending FGM/C in order to promote the flourishing of women. The first section highlights the problem statements and the focus of the study. The second section explains the motivations of the study, while the third section explores the relevant literature for the study. The other section deals with the research question. The fifth section offers the objectives of the study. Section six discusses the research methodology and approach. Section seven explains research ethics and limitations, while section eight explores positioning of the study in Practical Theology. The last section presents key concepts.

This study mainly focuses on the role of the Church in ending FGM/C to promote the flourishing of women with a focus on the Wolaita Kale Heywet Church (WKHC) in Southern Ethiopia. The role of the Church in issues of gender, health and development is very important if the Church uses a holistic approach to reach out the larger community in terms of attending to its holistic (that is, economic, social, psychological, and spiritual) needs. In this vein, the study attempts to ultimately plot a way forward for the WKHC to assess the role it plays with regard to FGM/C.

The next chapter provides a review of literature relating to FGM/C and its consequences for health.

Chapter Two

Female Genital Mutilation/Cutting and Its Consequences for Health

2.1. Introduction

This chapter is a review of literature pertaining to Female Genital Mutilation/Cutting (FGM/C) and its consequential repercussions for the health and wellbeing of affected women. The chapter has four main parts with brief explanations. The first section discusses the use of terminology as well as the nature of the practice from a public health perspective. The second section will highlight the consequences of FGM/C for health. This includes both the physical complications and psychological problems. The third section explores how FGM/C perceived in Africa, while the last section discusses the prevalence of FGM/C in Ethiopia and governmental measures for its eradication.

2.2. What is Female Genital Mutilation/Cutting?

2.2.1. Terminology

FGM/C is a total or partial removal of women's sexual organs for non-medical reasons. The practice causes both immediate and long-term effects on the health of women (Burrage, 2016:16). Since it has some sorts of harm on women and their sexuality the French call the practice as *mutilation sexuelle feminine* means female sexual mutilation. The international community declared FGM/C as a form of violence and included a clause about it in the Article 1 of the Declaration on the Elimination of Violence Against Women. Thus, as Rahman and Toubia (2000:25) concludes, FGM/C is “regarded as an ‘act of gender-based violence’ that ‘results in... harm or suffering to women’”.

Many scholars (see for example, Skaine, 2005:7; Rahman, 2000:3) agree that FGM/C is a collective name that refers to the different kinds of traditional practices regarding the cutting of female genitals. The other terms used to describe the practice include excision, cutting, female traditional surgery, female surgeries, and female circumcision (Skain, 2005:7). However, there are still disagreements among the scholars regarding appropriate terminology. For instance, some find the term “circumcision” to be somehow inaccurate when describing the practice and “mutilation”

political (Skaine, 2005). Others (e.g. Dorkenoo, 1992) choose to use the term “female genital surgeries” in lieu of “mutilation” or “cutting” but Skain, Roberson and James find the term “cutting” to be more appropriate (cf. Skaine, 2005:7). In the same context, the international community used the term “female circumcision” to describe the practice for many years, however, the term “female genital mutilation” has been adopted by many human rights and women’s health activists as the term arguably indicates the harm caused by the practice (Rahman and Toubia, 2000:4).

Rahman and Toubia (2000:3) indicates that, in various parts of Africa, different kinds of local names are used to describe the practice (Rahman & Toubia, 2000:3). For example, in Sudan, they use the term *tahur*; in Egypt, it is called *tahara*; and in Mali it is referred to as *bolokoli*. In Ethiopia, the practice is termed *girzat* in the Amharic language⁸. However, the word *girzat* (circumcision) that is used to describe the practice in Amharic is a derived nominal from the verb *Geez*, which, when translated in English, means ‘to cut’ (Yayehyirad, 2013:23).

It is also worth noting that the term “mutilation” tends to offend those who undergo the practice since they do not feel being mutilated. That is to say, although the term “female genital mutilation” can serve as an effective tool for policy and advocacy, some organizations that work with communities that perform FGM/C began to consider the term as offensive when they put themselves in the shoes of women who underwent the practice (Skaine, 2005:8). Nahid Toubia states why she argues for the term “female circumcision” as cited in Skaine (2005:2):

Efforts to empower women cannot begin with using language that offends them... We accept that the term female genital mutilation has been too widely used to be rolled back. In fact, we prefer to retain the term FGM at the policy level to remind everyone of the effect of this practice on girls and women. However, we advocate the use of the term female circumcision when dealing with affected individuals, parents, or other community members. Consider what an African woman may feel when a stranger asks her if she is ‘mutilated’ or whether she plans to ‘mutilate’ her daughter. It is important that we respect the feelings and beliefs of individuals even as we inform them of facts contrary to these beliefs.

⁸ Amharic is the official national language in Ethiopia.

Therefore, researchers and some international development agencies began to use the term “female genital circumcision” in order to be more culturally sensitive. However, the United Nations’ Special Rapporteur on Traditional Practices attempts to highlight again the risk of unbalanced sensitivity to such kind of harmful practice that affects primarily girls and women. Thus, the Special Rapporteur suggested to keep disclosing the consequences of the practice even through its terminology (UNICEF, 2013:7). There was transition from the term “female circumcision” to “female genital mutilation” in the international literatures. However, some writers began to use another term called “female genital cutting” in late 1990s because, as Yayehyirad (2008:86-87) puts it, “the intent is circumcision, but the effect is mutilation”.

The Inter African Committee (IAC) conference, entitled “Harmful Traditional Practices Affecting the Health of Women and Children”, held in 1990 at Addis Ababa instated the term “*female genital mutilation*” and the delegates from more than 28 African countries agreed to use this term when they engage in addressing the practice (Yayehyirad, 2008:88). In 1991, the World Health Organization (WHO) also recommended the term to the United Nations (UNICEF, 2013:7). In Ethiopia, National Committee for Traditional Practices in Ethiopia (NCTPE) or *Ye Ethiopia Goji Limadawi Dirgitoch Aswogaj Mahiber* (EGLDAM), National Association for the Elimination of Harmful Traditional Practices in Ethiopia⁹, and most organizations use “Female Genital Mutilation” for their foreign language communication and they use other local names when they do communication in the Ethiopian languages (Yayehyirad, 2008:88).

However, currently the United Nations Population Fund (UNFPA) and UNICEF use a “hybrid term”, female genital mutilation/cutting (FGM/C). This implies that the term “mutilation” shows that the practice is the violation of the rights of women and girls, and at the same time the term “cutting” indicates the recognition and the importance of using respectful terminologies when engaging with practicing communities (UNICEF, 2013:7). This explains why I also use the hybrid term “Female Genital Mutilation/Cutting (FGM/C)” throughout the pages of this study in order to recognize the validity of the two expressions: the procedure of the practice intended as circumcision, but its effects are mutilation (Anika and Nahid, 2000:x).

⁹ *Ye Ethiopia Goji Limadawi Dirgitoch Aswogaj Mahiber* (EGLDAM), the National Association for the Elimination of Harmful Traditional Practices in Ethiopia, is formerly known as National Committee for Traditional Practices in Ethiopia (NCTPE) (Yayehyirad, 2008:2).

2.2.2. Types of FGM/C

The World Health Organization (WHO) categorises FGM/C into four types. According to Burrage (2016:16), the first type is Clitoridectomy. This is the removal of the clitoral hood with or without excision of part or the entire clitoris. The second type is excision. This is the removal of the clitoris with partial or complete cutting of the labia minora. The third type of FGM/C is infibulation. During the practice of infibulation, part or all of the external genitalia is removed and stitching (that is, narrowing) of the vaginal opening is done. The fourth type is unclassified and includes piercing, pricking, cauterizing or burning, scraping, stretching or pulling the labia or harming the female genitalia.

According to the Ethiopian Orthodox Tewahedo Church Development and Inter Church Aid Commission HIV/AIDS Prevention and Control Department, clitoridectomy, excision, and infibulation are common in Ethiopia as it is carried out in most regions of the country (in Yayehyirad, 2013:26). The types of FGM/C performed vary on the basis of ethnic groups, particularly in SNNPR. For example, the Hadiya and the Kambatta ethnic groups perform excision, but the Wolaita, Selti, Alaba, and Sidama ethnic groups perform mainly Sunna¹⁰ (Clitoridectomy). In SNNPR, sometimes the practice of FGM/C occur more than once to a girl if her mother is dissatisfied with the first operation (Birhan Research and Development Consultancy, 2007:33).

Infibulation is practiced in some parts of Ethiopia, such as Afar, Somali, Harar, Dire-Dawa, and parts of Benshangul Gumuz (Yayehyirad, 2008:90). With infibulation, practitioners use a small stick to keep the opening of the urinary area and the vagina open. A girl may be cut open just before marriage or the husband penetrates the girl to make forced entry. Therefore, the practice has painful consequences for a new bride. If the husband goes away re-infibulation might be done to keep the wife faithful (Willcox, 2005:11).

¹⁰ The Sunna type of FGM/C is considered to be type one in all the FGM/C. This is basically Clitoridectomy or the cutting of the tip of the clitoris. Many countries have their own local terminology for the practice of FGM/C. For example, *Sunna* refers to clitoridectomy and *Pharaonic* refers to Infibulation according to the literature in Sudan. The term “circumcision” is very dominant among the French-speaking African literature. Rahman and Toubia (eds.). 2000. *Female Genital Mutilation: A Guide to Laws and Policies Worldwide*. Zed Books: London & New York, 3.

2.2.3. Origin of the practice

The origins of FGM/C go back far in time and it has been practiced in several places of the world. However, there are different opinions regarding the origin of FGM/C (Hirut, 2012:8). Many scholars (e.g. Skaine, 2005:16) agree that the practice predates both Christianity and Islam. Many people attempt to link FGM/C with Islam; however, FGM/C had been practiced as early as 2500BC according to the earliest record. That means it has been taking place even before the time of Muhammad, the founder of Islam (Willcox, 2005:2).

According to EGLDAM, the earliest writings suggest that FGM/C has been practiced in Egypt for more than 2,000 years. In the sixth century, a Greek physician praised the practice because it was believed that unless the clitoris is cut, it would grow and lead a girl to inappropriate behaviour or thoughts (Yayehyirad, 2008:82). Some evidence suggests that slave traders were interested in infibulated women (infibulated slaves) because their prices could be higher since their work was not uninterrupted by childbearing (Yayehyirad, 2008:93).

The origins of FGM/C are mystery and it is not easy to answer why the practice continues even today. It is interesting to note that traditionally FGM/C never existed in Europe, America, the Pacific areas, and the central part of Asia (Hirut, 2012:8). Nevertheless, it is difficult to ignore the possibility that FGM/C in Africa and Arab come from ceremonies passed on by the Cushitic and Semitic inhabitants of the Red Sea coast. The infibulation and its spreading in Sudan, Somalia, and Ethiopia might show that there was relationship among the Cushitic speaking people (Hirut, 2012:9).

The early documents suggest as the practice of FGM/C began in Egypt, but there is no engraving that indicates its existence. The anthropological findings and the historical resources lead us to not know much more than speculation regarding where and how the practice was begun (Skaine, 2005:16). Having said that, it is believed, however, that the practice of FGM/C most likely originated in Egypt and the Nile valley. Through Arab traders, the practice spread out to the Red Sea coastal and then to the eastern Sudan. For this reason, it appears that FGM/C was performed on slave girls by slave traders in the eighteenth century (Skaine, 2005:16).

2.2.4. Practitioners and their practices

According to the World Health Organization (WHO), the practitioners of FGM/C use different kinds of instruments such as special knives, scissors, and pieces of glass or razors. In some rare cases, they use sharp stones (for example in the eastern Sudan), cauterization or burning (for example in some parts of Ethiopia) fingernails to pluck out the clitoris (for example in some parts of Gambia) (in Skaine, 2005:11-12). Besides, FGM/C is often performed by elderly women who may have poor eyesight. As it were, the procedure takes about 20 minutes but that depends on the skill of the practitioners and how much the girl struggles. The crude tools, unhygienic conditions, and poor lighting cause the suffering of the girl (Skaine, 2005:12).

Moreover, FGM/C is often performed by maternal grandmothers or aunts or traditional birth attendants but, sometimes, even men who have no clinical training are the practitioners. Nevertheless, the practice is nowadays done by those who have medical skills when it happens among wealthier and/or educated people as Burrage (2016:16) confirms. Although FGM/C is mainly performed by traditional practitioners (particularly traditional circumcisers), the number of health-care providers who perform FGM/C is increasing in some countries such as Egypt, Kenya, and Sudan (UNICEF, 2013:43). However, the increasing involvement of medical professionals in performing FGM/C is due to increasing recognition of the health risk related with the practice (Yayehyirad, 2008:92-93).

In Ethiopia, FGM/C is largely performed by traditional birth attendants or traditional “doctors”. Often, these are elderly women who are paid a small amount of money in cash or in kind for performing the practice. In Southern Ethiopia, the practitioners are mostly the caste group of specialist crafts workers such as smiths, potters, tanners, and *chinasha*¹¹ (in the case of Wolaita). Although FGM/C is mainly performed by traditional practitioners, according to the 2011 UNICEF survey, health workers have done 20% of FGM/C on girls under 15 in Ethiopia. In 2005, UNICEF reports that 92% FGM/C carried out by traditional circumcisers, 5.5% by traditional birth attendants, and 0.9% by health workers (The Democratic Republic of Ethiopia Ministry of Health, 2016:16).

¹¹ Potters are *chinasha* in Wolaita language.

FGM/C is a puberty ritual for some ethnic groups of Ethiopia (for example the Hadiya). Thus, a feast is often held for the guest in the case of wealthy families. If there is no feast, the circumciser will get a meal and coffee. Usually the circumcisers are paid in cash, with fees varying from 5 to 20 Ethiopian Birr (0.18 to 0.73 US Dollar). In Ethiopia, the practitioners use a blade, knife, fingernails or stone to perform FGM/C (Willcox, 2005:10). In Ethiopia, when FGM/C is completed, they use different kinds of locally prepared medicines (for example, egg, soot, yolk) or pharmaceuticals (for example, gentian violet, alcohol) in order to stop the bleeding and speed the healing of the wound (Yayehyirad, 2008:93).

In many countries, FGM/C is performed as a transition from childhood to adulthood and in most communities between the age of 4 and 14 years. But the age varies from place to place. In Uganda, for example, mutilation is performed on young adult while in southern Nigeria it is performed on the babies, in the first few months of life (Yayehyirad, 2008:95). EGLDAM presents the age at which mutilation is performed in Ethiopia in the following table.

Table 2.1: Ethnic Groups by Age at FGM/C, Ethiopia various years¹²

Infant 8 days or less	Young child 1-10 years	10 years or more	Related to Marriage	
			Just before	After
Afar	Jebelawi	Dasench	Fadashi (at betrothal)	Goffa
Agew/Kamyr	Konta	Guragie (Mareko area)	Oromo (Arsi Negele)	Sidama
Amhara	Oromo (Chiro, Gimbi)	Hadiya Kembata	Goffa	
Argoba	Somali (7-8 years)	Konto	Wolaita	
Kemant		Oromo (Adala)	Arbore	
Oromo		Timbaro		
Tigray				

As seen in the table above, in Ethiopia, the age at which a girl undergoes FGM/C varies by ethnic groups. For instance, the northern part of the country, Tigray and Amhara, and the neighbouring Argoba and Afar areas perform FGM/C as early as the eight days after birth. On the other hand,

¹² Yayehyirad, K and others (eds.). 2008. *Old Beyond Imaginings: Ethiopia Harmful Traditional Practices (Second Edition)*. EGLDAM, Ye Ethiopia Goji Limadawi Dirgitoch Aswogaj Mahiber (The Former National Committee for Traditional Practices in Ethiopia – NCTPE), Addis Ababa, Ethiopia, 95.

others including the Harari, Somali, and some ethnic groups in the southern part of the country perform FGM/C at a later age, that is, 4 years to over 20 years of age (Yayehyirad, 2008:95-6, Norwegian Church Aid, 2009:5). In SNNPR, many communities consider FGM/C as the rite of passage to marriage, a symbol that shows a girl is ready for marriage. Hence, traditionally FGM/C is performed only after the arrangement of the girl's marriage. The FGM/C practiced either just before the girl goes to her husband (like in the case of Wolaita) or as soon as the girl goes to her husband's home (like in the case of Sidama). Nevertheless, it is modernization (especially the culture of Amhara and Ethiopian Orthodox Church) that influenced this tradition. This explains why most of the circumcisions nowadays are being performed at an earlier age (Birhan Research and Development Consultancy, 2007:5-6).

In Wolaita, the age at mutilation varies among *woredas*. In some *woredas*, parents circumcise their girls at the young age, however, the girls have no ability to run away from the practice. According to Kembatti Mentti Gezzimma (KMG)¹³ study, about 60% of women in the study underwent FGM/C around puberty (10 years and above), followed by between 1 and 9 years in 34% of the respondents. Seventy-five percent of women in the study areas with a daughter reported having at least one of the daughters circumcised with highest frequency of 87.6% in Damot Fulasa and 86.6% in Kindo Koysha *woreda* (KMG, 2011:viii-ix). The following table explores the age at mutilation in four *woredas* of Wolaita zone.

Table 2.2: Age at mutilation in four *woredas* of Wolaita zone¹⁴

Age at Mutilation/Cutting	Damot Sore	Boloso Sore	Damot Fulasa	Kindo Koysha	Total
At infancy (<1 year)	10.3	7.4	10.0	5.1	7.9
1 to 9 years	32.5	26.1	34.3	40.8	32.3

¹³ *Kembatti Mentti Gezzimma* (KMG), Kembatta Women Standing Together, is founded by the two sisters, Bogaletch and Fikrte Gebre, who grew up in rural Ethiopia where gender-based violence including FGM/C was endemic. To make the abandonment of FGM/C a reality and practical on the ground KMG “has been operating in two regions of the country which comprises 25 Districts and two towns. In SNNPR, Seven Districts and one Zonal town Durame city of Kembatta Tembaro Zone, Five districts of Gamo Gofa and Segen Akababi Zone, Two Districts of Gurage Zone, five Districts of Wolaita Zone, Derashe and Konso special district and Sidama district. In Oromia region, we are operating in two districts of West Arisi Zone. All the operational areas except Kembatta Tembaro Zone are the Scale up areas” (KMG-Ethiopia, 2014:1)

¹⁴ KMG, 2011. *Baseline Survey on FGM and other Forms of Gender-Based Violence in Five Intervention Woredas of Wolaita Zone, SNNPR, Ethiopia*, Addis Ababa, Ethiopia, 40

10 years and above	57.1	66.6	55.7	54.1	59.7
Proportion of women with at least one daughter	78.1	65.5	57.4	76.6	70.6
Proportion of women with at least one daughter circumcised	36.7	64.2	87.6	86.6	74.9
N	242	246	73	165	726

Note: n* refers to those who had never been circumcised

2.2.5. Motivations for the practice

The World Health Organization (WHO) provides four main motivations for the practice of FGM/C such as socio-cultural, spiritual and religious, hygienic and aesthetic, and psychosexual (Skaine, 2005:17). But some scholars (e.g. Rahman and Toubia, 2000:5; Yayehyirad, 2008:107-8) add motivations for the practice of FGM/C such as respect for custom and tradition, suppressing women's sexuality, prevent problems for the husband, control women's emotion (calm her emotions/as tranquilizer), avoid shame and ostracization, avoid stigmatization, for the good of woman, and prevent difficulties at childbirth.

Motivations for the practice of FGM/C are complex and related to each other. That is why it is difficult to categorize the explanations of the practice. The explanation of FGM/C should be based on the whole values and belief system that support the practice but not on a single factor (Rahman and Toubia, 2000:5). However, many scholars (Hirut, 2012:3; Rahman and Toubia, 2005:5-6) strongly argue that FGM/C is a socially constructed concept like gender and sexuality. FGM/C has been often related with a social norm and considered as a traditional rule of behaviour. Nevertheless, UNICEF is still making progress in understanding of how social norms operate so that they can understand and address the social forces that perpetuate FGM/C (UNICEF, 2013:14).

Furthermore, the social construction of sexuality is linked with the cultural concepts of masculinity and femininity. The idea that creates the essence of femaleness and maleness are articulated in sexual norms and ideologies. The identity of adult male concentrates on the transformation of female genital organs to bring cultural correctness (Hirut, 2012:2-3). Therefore, as Hirut (2012:3) argues, FGM/C “must be studied in a gender perspective that also encompasses the construction

and experience of femaleness, which is concerned with the social and cultural construction of femaleness through symbolic practices performed on the female body”.

Moreover, FGM/C is considered an important part in the gendering process. Gender is attributed to human beings through a symbol and ritual of the bodily transformation such as FGM/C. According to moral and sexual ideologies that were mainly codified by men, it is believed that FGM/C is a crucial step in shaping a girl into adult or “marriageable femaleness” to use the words of Hirut (2012:2). With this awareness, there are few men who attempts to mention the social implication of FGM/C as the practice is performed in the place where women have low status and they are used mainly for sex (Hirut, 2012:11). For that reason, it could be argued that FGM/C is perpetuated by culture with social and cultural construction of gender in patriarchal society. Furthermore, it appears that the practice of FGM/C is continued for the sake of men sexuality in a patriarchal society (like Wolaita).

In the same line of thoughts, it is believed that one of the most common reasons to the persistent of FGM/C is supporting a local custom (tradition). Some women say that they are not willing to change the custom since they have been following it for a very long time (Yayehyirad, 2008:105). In some parts of Ethiopia, it is believed that the practice of FGM/C is important for the prevention of rape. The Somali people assume that it is impossible to rape a girl who has been infibulated so that it preserves the sanctity of woman. The Somali girls often stay outside of the home and they spend the day working by herding animals in the bush. Therefore, the Somali people have a concern that if the practice of FGM/C is discontinued their women will not be protected from the rape (The Democratic Republic of Ethiopia Ministry of Health, 2016:19).

According to EGLDAM, the National Association for the Elimination of Harmful Traditional Practices in Ethiopia, the practice of FGM/C is based on the dominant belief that attempts to control the sexuality of women and preserve the virginity of girls until marriage. In some Ethiopian cultures, men will not marry uncut girl because they assume those girls as sexually permissive or “unclean” (Yayehyirad, 2008:105). In this regard, Rahman and Toubia (2005:5-6) highlight how FGM/C is perpetuated by culture for the interest of male sexuality:

A fundamental reason advanced for female circumcision is the need to control women’s sexuality. Because sexuality is socially constructed, it has different meanings depending

on its context. For many communities that practice FC/FGM, a family or clan's honor depends on a girl's virginity or sexual restraint. This is the case in Egypt, Sudan and Somalia, where FC/FGM is perceived as a way to curtail premarital sex and preserve virginity. In other contexts, such as in Kenya and Uganda, where sexual 'purity' is not a concern, FC/FM is performed to reduce the woman's sexual demands on her husband, thus allowing him to have several wives. Notwithstanding the different reasons to control women's sexuality, FC/FGM is intended to reduce women's sexual desire, thus promoting virginity and protecting marital fidelity, in the interest of male sexuality.

This provides evidential merit to Skaine's (2005:20) assertion that FGM/C is a tool used to discriminate against women and control their sexuality. In other words, the practice relegates the value of women to the level of economic commodities invested by men for men (but the process often occurs on behalf of men by women). In this regard, the tragic investment has some economic return for the investor (men) in a short term but its longer-term return (reward) is limited for any party. Thus, the investment (FGM/C) has severe consequences on the "commodity" (women) including lifelong ill-health and disability (Burrage, 2016:18).

This is suggestive of the fact that controlling women's sexual desire is one of the main motivations for practitioners to practice FGM/C in Ethiopia. This is because, in some traditional Ethiopian societies, it is alleged that women cannot control their sexual desires if they do not undergo the practice. Accordingly, the sexual organ of women meant to arouse their sexual desires ought to be removed for them to be able to control their libido (Yayehyirad, 2013:29). Nevertheless, the motivations to perform FGM/C varies among ethnic groups but it is mainly related to the subordinate status of women in a patriarchal society (Norwegian Church Aid/Ethiopia, 2009:7). Wolaita has a single reason for the practice of FGM/C, which is related to suppressing women's sexuality. That is to say, in Wolaita, FGM/C is used as a tool to suppress women's sexuality. The practice is also aimed at preventing women from being "sexy" and controlling their desire of sex (even from their husbands). It is also believed that FGM/C prevents premarital sex and loss of virginity (disgrace of the family) (Yayehyirad, 2008:107).

In 2013, the United Nations Children's Fund (UNICEF) conducted research in sixteen countries to determine the attitude of boys and men towards the continuation of the practice of FGM/C. In this research, UNICEF (2013:58) concluded that the majority of boys and men (from most of the

countries) think that FGM/C should end. FGM/C assumed as a manifestation of the patriarchal oppression of women and men as supporters of the practice for a decade, but this cannot be the case now (UNICEF, 2013:58). It should be highlighted, however, that Ethiopia is not included in the sixteen countries indicated in this UNICEF report. This explains why I am less convinced on the assumption that rejects the link between FGM/C and patriarchal oppression of women in Ethiopia, particularly in a patriarchal society like that of Wolaita. Although women perform mainly FGM/C, it is impossible to mask the male-centeredness of the practice, the ultimate cause that leads women to uphold the practice. In patriarchal society, men demand FGM/C as a requirement of marriage. Therefore, women attempt to uphold consciously or unconsciously the patriarchal practices like FGM/C because they assume that “submitting” to the existing social setting is the only way to survive.

In the same vein, men are still the decision-makers in Ethiopia at all levels human life including home, community, institutions, and government structures. Two percent of women are in top policy decision-making positions in Ethiopia and this makes the country one of the ten countries in Africa with the least progress regarding women’s involvement in decision-making. Recently it appears that the number of women in the Ethiopian Federal Parliament has a slight increase in number (increased in the May 2000 elections from 17 to 48) and at various councils. In the same prospect, Yayehyirad (2008:77) confirms that women representation is still low Ethiopia as the current average number of women is about 5-8% when compared to the total population in which women constitute 50%. The Population Media Center of Ethiopia, *Literature Review on Female Genital Mutilation*, argues that gender inequality is the root cause of the practice of FGM/C in Ethiopia, a patriarchal society:

The root cause for the practice of FGM is gender inequality based on unequal relationship between men and women. Ethiopia is a patriarchal society where male superiority negatively affects the lives of women. Likewise, FGM is practiced on girls to lessen their sexual desire, preserve their virginity until they get married, and make them submissive to their husbands. In most cases, it is committed against the will of the girl-child while she is living under the guidance of her parents or guardians. The children do not understand what is happening to them; even if they know they could not negotiate to stop the practice. Therefore, FGM violates the rights of children as it endangers their safety and security; and is an obstacle to equality, development and peace (Bogaletch, 2008:6).

2.3. The Consequences of Female Genital Mutilation/Cutting for Health

FGM/C has serious health consequences for girls and women. The consequences are mainly categorized into two: (i) physical complications and (ii) psychological problems (cf. Anika and Nahid 2000:8).

2.3.1. Physical Complications

Potential physical consequences are many. For example, infant and maternal mortality are very high in areas where FGM/C is practised. However, the exact number of girls who die due to FGM/C is not known (Skaine, 2005:23). The physical consequences of FGM/C can be both short-term and long-term. The short-term consequences include severe pain, shock, ranging from haemorrhage (excessive bleeding), damage to organs and the adjacent tissues, tetanus and rampant infections, anaemia, acute urine retention, unintended labia fusion, and death (Anika and Nahid, 2000:8; Burrage, 2016:18; The Democratic Republic of Ethiopia Ministry of Health, 2016:26). As it were, infection is a very common and immediate complication and it is caused because of unhygienic cutting instruments. If urine or faeces contaminate the genital area, infection can occur within a few days of the circumcision. If the bacterium spreads to the bloodstream, infection can cause septicaemia. Swelling and inflammation of the wound can lead acute urine retention. Mostly, such retention is irreversible and can cause urinary tract infection (Anika and Nahid, 2000:8).

The long-term physical complications include difficulty in passing urine, open sores, need for surgery, menstrual problems, painful sexual intercourse and poor quality of sexual life, infertility, clitoral neuroma, chronic pain, infections (e.g. cysts, abscesses and genital ulcers, chronic pelvic infections, urinary tract infections, reproductive tract infections), Keloids (i.e. excessive scar tissue), a high risk of HIV/AIDS and cervical cancer (Burrage, 2016:18; The Democratic Republic of Ethiopia Ministry of Health, 2016:25-6). Any type of FGM/C can cause the long-term complications, however, type 2 and 3 cause severe complications. Infibulation has some common complications such as chronic pelvic infections (that cause irreversible harm on the reproductive organs and leads to infertility), fistulae, repeated urinary tract infection; excessive growth of scar tissue (cysts) stones in the urethra at the site of the cutting (Anika and Nahid, 2000:8).

Furthermore, infibulated women's pain is very high during menstruation. Besides, women's anxiety about their genitals increases their experience of pain. Sometimes such pain also causes

infections. The practice also causes pain during sexual intercourse and problems during childbirth. Unless an infibulated woman is ‘defibulated’ (cut open) when she delivers her children, the labour causes death or a great complication for both the child and the mother (Anika and Nahid, 2000:9). Rachel Carnegie, consultant at UNICEF Eastern and Southern Africa Research Activities, explains the suffering that is caused by infibulation:

Sometimes the girl’s legs are bound together for several weeks so that she cannot move, to allow the wound to close. If the vulva does not heal properly or the opening is thought to be too big, the girl may be operated on again. Later in life, the woman may need to be cut again in order to have sexual intercourse. When it comes to childbirth, she will need to be cut to allow the baby out (Skaine, 2005:10).

Aside from death, the consequences of FGM/C include infertility, scarring, painful sex, long and obstructed labour, rupture of the vaginal walls, chronic uterine and vaginal infections, dysmenorrhea, bladder incontinence, and obstacle in the flow of menstrual blood. In addition, this may lead to increased maternal death, haemorrhage, stillbirths, and infection (Skaine, 2005:23). The United Nations Population Fund (UNFPA) also did a study on Sudanese women in 1993. As a result, UNFPA reports that 5.5% women experience pain when having sex while 9.3% have difficult (impossible) “penetration” (Skaine, 2005:27).

2.3.2. Psychological Complications

FGM/C is usually carried out when girls are young and uninformed. Thus, the practice often occurs through deception, coercion, intimidation, and violence by those the girl has trusted including parents, friends, and relatives. The trauma of experiencing such betrayal, being subjected to procedures often done without anaesthesia, and being forced sometimes to watch the operation of other girls, all have consequential psychological implications. This is evidential indication that FGM/C can cause long-lasting psychological complications on women (Skaine, 2005:27). In addition the trauma, the psychological complications include disturbances (in sleeping, eating, cognition and mood), fear of sexual intercourse, bitterness (due to the felt betrayal), submission (inhibition), suppressed feelings of anger, feel incomplete (for most women, it feels as though a part of their genital has been taken away or lost), humiliation, tearfulness, stress, loss of self-esteem, depression, chronic anxiety, phobias, panic, and even psychotic disorders (Anika and Nahid, 2000:9; The Democratic Republic of Ethiopia Ministry of Health, 2016:34).

There are few studies on the effects of FGM/C on women sexuality (see for example, Anika and Nahid, 2000:9; Skaine, 2005:27). Nevertheless, a study conducted by the University of Khartoum interviewed 1,545 Sudanese in 1981 and 50 percent of those who underwent FGM/C said that the women were not able to enjoy sex at all, but they just see it as a duty (Rosemarie, 2005:27). Moreover, it is very difficult to have sex for the infibulated women. When they are newlyweds they are afraid to discuss their problems. Some women became traumatized and feel uncomfortable to touch their own genitals even for cleaning. It eventually leads to the loss of desire to have sex after marriage. However, a loving and caring partner can assist the women to overcome their feelings and have sexual satisfaction (Skaine, 2005:27). Some scholars (e.g. Skaine, 2005:28) relate psycho-sexual complications with psychological complications of FGM/C as indicated below:

There are problems with sexual attractions and in intimate relations that leave a lasting mark in the life and mind of the woman who has undergone it. I read this book; the author was explaining her sad story. She told how she was psychologically affected and that she is angry about what happened to her. She called that woman [circumciser] a vulture. She wanted to kill her. So, these problems would follow a person through her entire life. With the psychological complications, schools are involved. I said to a woman, 'You are angry about the whole issue and you are angry about the community, about your family. Why did they allow that to happen to you? There is a loss of trust and confidence. You feel incompleteness. You get anxiety and trauma if you are not counseled or if you don't meet other people who console you, so that you let go. You feel suffering the whole of your life, and you just feel that you are not complete. You feel that you are different'.

It can, therefore, be said that the practice of FGM/C somehow interferes with the sexual responses of women but that does not mean it eliminates the possibility of sexual pleasure and climax. It appears that when some parts of genital are cut, other parts of the body (like the breasts) can take over their roles and function as organs for sexual stimuli. However, the fact that the sexual experience of women who underwent the practice is still not fully understood, is indicative that further research must be done in this area (Anika and Nahid, 2000:9).

Moreover, FGM/C causes psychological complications in poor families. The practice contributes to poverty because, when people celebrate, it is a very big deal. They spend a lot of money for the celebration but not for sending their children to school (educating their children). As a result, they

ask for money from the government offices or non-governmental organizations after spending a lot of money for celebrations. Lastly, they start regretting their deeds (Skaine, 2005:28). In this regard, FGM/C is also linked with the cyclical nature of poverty as described in the following statement:

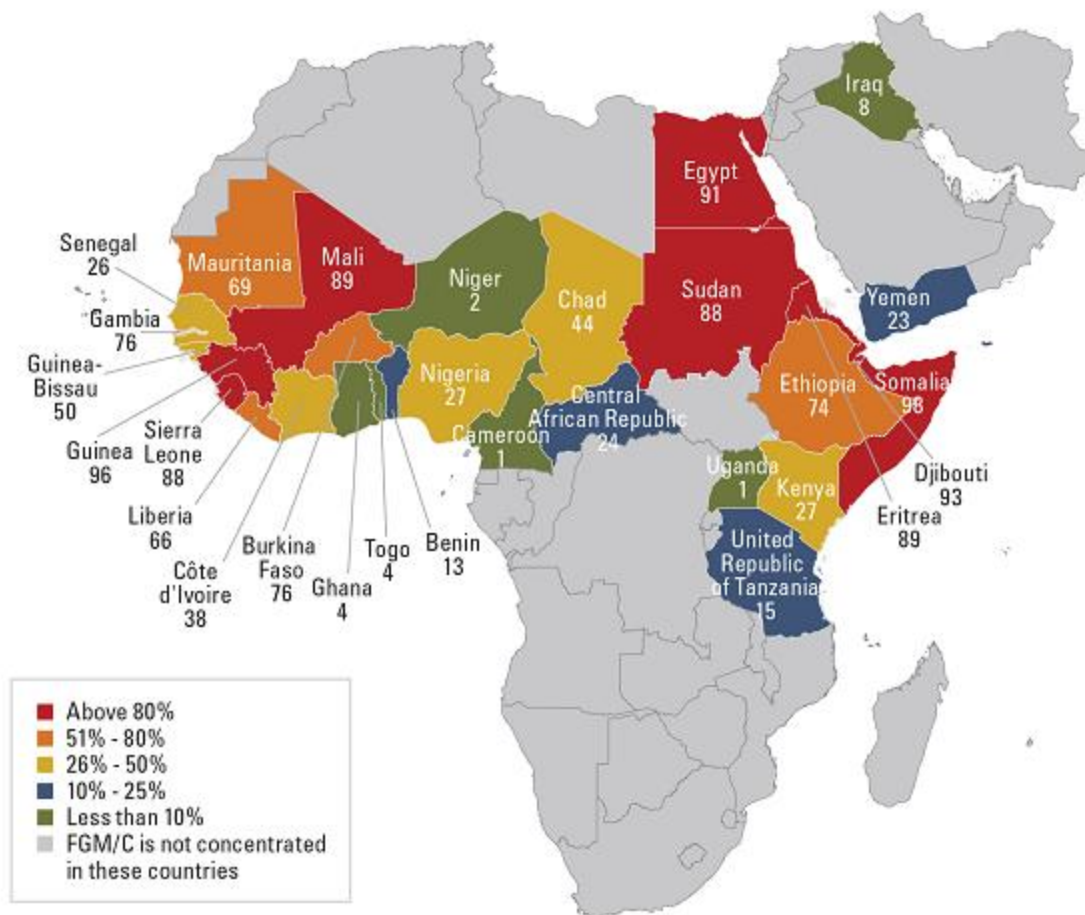
Poverty is an issue because money is being used unnecessarily to pay the person who operates on the girls. The other problem is that the circumcised girl gets sick and, so they go to the hospital to treat her as a person who has had an accident, but it was not an accident; it was just done to them. So, it causes poverty in the family. The money which would have been used for other purposes is used to treat a person who is not necessary to be in that situation (Skaine, 2005:28).

2.4. Female Genital Mutilation/Cutting in Africa

Today, there are more than 125 million girls and women from various parts of the world who undergo FGM/C (UNICEF, 2013:22). The practice is, however, mainly performed and concentrated in African countries and in the Middle East (cf. Burrage, 2016:48). This is suggestive that FGM/C is still a challenge in Africa and even globally.

Figure 2.1: Countries where FGM/C is concentrated, from the Atlantic Coast to the Horn of Africa¹⁵

¹⁵ United Nations Children's Fund, 2013. *Female Genital Mutilation/Cutting: A statistical overview and exploration of the dynamics of change*, UNICEF, New York, 26.



The African Charter on Human and Peoples' Rights (the African Charter) that was adopted by the Assembly of the Union in the 2nd Ordinary Session at Maputo on 11 July 2003 describes Article 5 as Elimination of Harmful Practices. According to Article 5 of the African Charter, all States that are party to the Charter must prohibit and condemn all kinds of harmful practices that cause any negative effects on the human rights of women or oppose the recognized international standards. These States Parties are, therefore, responsible to take the legislative and other measures to eradicate such kind of practices. The measures are the creation of public awareness, prohibition, provision of necessary support to victims of harmful practices, and protection of women who are at risk (exposed to harmful practices, all other kinds of violence, intolerance and abuse). The

prohibition includes all forms of FGM/C whether it is medicalization and para-medicalization of the practice.¹⁶

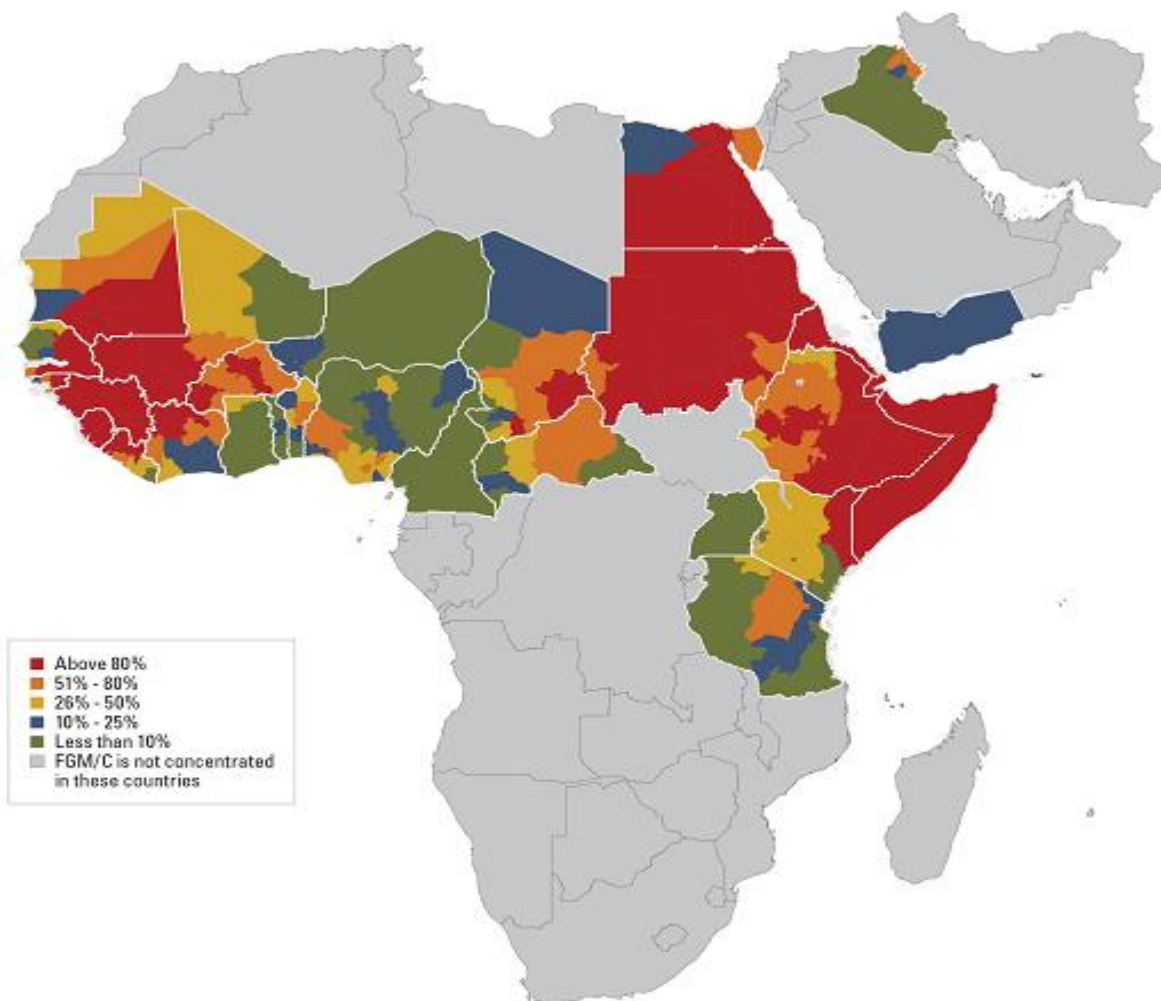
Unfortunately, the African Charter on Human and Peoples' Rights is not ratified by all African countries. Currently, the African Charter is signed and ratified by 36 countries, signed but not ratified by 15 countries, and not yet signed or ratified by 3 countries. Ethiopia is one of the 15 African countries that signed but did not ratify the African Charter.¹⁷ The United Nations Children's Fund (UNICEF) admits that the efforts that they made in ending FGM/C is progressive, but it is very slow compared to the prevalence of the practice. The international community is acknowledging and still learning more about FGM/C and why and where it occurs (Burrage, 2016:19).

Figure 2.2: The prevalence levels of FGM/C within countries¹⁸

¹⁶ African Commission on Human and Peoples' Rights, 2003. *The African Charter on Human and Peoples' Rights [Online]*. Available: <http://www.achpr.org/instruments/women-protocol/#5> Accessed [2017, 8 August].

¹⁷ African Commission on Human and Peoples' Rights, 2003. *The African Charter on Human and Peoples' Rights [Online]*. Available: <http://www.achpr.org/instruments/women-protocol/#5> Accessed [2017, 8 August].

¹⁸ United Nations Children's Fund, 2013. *Female Genital Mutilation/Cutting: A statistical overview and exploration of the dynamics of change*, UNICEF, New York, 32.



The practice of FGM/C is continued in Africa despite the efforts that are being made (from inside and outside of Africa) to eliminate the practice. African have a less unified response to the practice (Skaine, 2005:3). The work of indigenous African activists and the African literature treated FGM/C with regularity until the mid-1960s when many novel and essays began to condemn the practice. However, there were strong counterattacks from those who support FGM/C based on the respect for tradition and resisting “Western feminist neo-colonization” (Bishop, 2009:38). Despite such defence of FGM/C, some changes occurred regarding social practice and national laws in Africa in the last forty years (Bishop, 2009:38).

Some Scholars (e.g. Bishop, 2009:38-39) attempt to address the binary that splits the debates of FGM/C into two groups, but without compromising with the practice. There is no compromise that suggests just a little (less) cutting in order to make both sides (those who support the practice and

those who oppose it) happy. Bishop (2009:39) notes that FGM/C should be eradicated. However, the challenge arises in terms of how to engage in the fight against FGM/C. He then suggests that there is a better way to criticize FGM/C without anger or insult. That is, the criticism should not be done by undermining the arguments that consider the practice as an important practice in Africa. This is because not to cut is more in line with African traditions and values (Bishop, 2009:40).

In African literature, oppositional narrative is a narrative that present incompatible stories which may be for or against FGM/C. This is in order to challenge the reader to rethink the practice without disclosing the author's rejections. The oppositional narratives (the indirect approach) is better than the overt condemnation (the direct approach) when we engage in the struggle against FGM/C. There are some African writers who are known for their "oppositional narratives" such as Ngugi wa Thiong'o, Ahmadou Kourouma, Awa Thiam, Calixthe Beyala, Nuruddin Farah, and Waris Dirie (Bishop, 2009:40). Oppositional narratives are very helpful for those who admire customs because it can influence their desire to deconceptualize the traditional African society and supports the fights in ending FGM/C in Africa and among the Diaspora (Bishop, 2009:51).

2.5. Female Genital Mutilation/Cutting in Ethiopia

According to UNICEF (2013), it is estimated that 23.8 million girls and women have undergone FGM/C in Ethiopia. This is the second highest national number in Africa, only next to Egypt, a country where 27.2 million girls and women have undergone FGM/C (UNICEF, 2013:i). As it were, FGM/C is carried out in all regions of Ethiopia except Gambella, and it is performed by people of all religions (Bogaletch, 2008:5). Although the origins of FGM/C in Ethiopia are not clear, it is arguable that the practice predates the conversion of Ethiopian emperors to Christianity, which happened in the 4th century. It is, therefore, surmised that the practice of FMG/C started with the introduction of Judaic practices, possibly at the same time as male circumcision began (Yayehyirad, 2008:83).

2.5.1. The Prevalence of FGM/C in Ethiopia

The prevalence of FGM/C in Ethiopia is 74% according to UNICEF (2013:26). In 2016, the Ethiopian Demographic and Health Survey (EDHS) conducted a study and all women age 15-49 answered a series of questions in order to gather information on women's knowledge, prevalence, type of circumcision, and attitudes towards the practice of FGM/C (Central Statistical Agency,

2016:45). According to the 2016 EDHS, 65.2 percent of Ethiopian women age 15-49 are circumcised. Of this cohort that have experienced FGM/C, 2.7% were cut with no flesh removed, 79.2% were cut with flesh removed, and 6.5% had their genitals sewn closed. In Ethiopia, the prevalence of FGM/C is highest among Muslim (82.2%) and lowest among Orthodox Christians (54.2%) (Central Statistical Agency, 2016:45).

Table 2.3: Prevalence of FGM/C by Age and Religion¹⁹

Background characteristic	Percentage of women circumcised	Number of women	Type of circumcision			
			Cut, no flesh removed	Cut, flesh removed	Genital sewn closed	Number of women circumcised
Age						
15-19	47.1	1,670	3.0	72.0	7.4	786
20-24	58.6	1,290	3.1	79.4	6.8	756
25-29	67.6	1,474	2.2	80.7	5.7	996
30-39	75.8	2,218	2.4	81.6	5.7	1,682
40-49	75.3	1,170	3.1	79.5	8.1	881
Religion						
Orthodox	54.2	3,424	3.6	64.8	2.3	1,856
Catholic	(58.2)	66	*	*	*	39
Protestant	65.8	1,862	2.1	92.5	2.5	1,226
Muslim	82.2	2,362	2.2	84.5	13.4	1,942
Traditional	(55.0)	62	*	*	*	34
Other	(9.9)	46	*	*	*	5
Total 15-49	65.2	7,822	2.7	79.2	6.5	5,101

Note: “Figures in parentheses are based on 25-49 unweighted cases. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed. Total includes 5 women/men/households for whom information on age is missing” (Central Statistical Agency, 2016:45).

¹⁹ Central Statistical Agency (CSA) [Ethiopia] and ICF. 2016. *Ethiopia Demographic and Health Survey 2016: Key Indicators Report*. Addis Ababa, Ethiopia, and Rockville, Maryland, USA. CSA and ICF, 45

It could be argued, therefore, that FGM/C is deeply rooted in the tradition of Ethiopian people because the practice is hidden by a culture of silence. It is practiced in both rural and urban communities including Addis Ababa, the capital city of Ethiopia (Bogaletch, 2008:3). The prevalence levels of FGM/C differ in the different parts of the country. According to the 2016 Ethiopian Demographic and Health Survey, the prevalence of FGM/C is very high in Somali and Afar (98.5 and 98.4% respectively), followed by Wolaita and Hadiya (92.3% both). Sixty-eight percent of rural women are circumcised, as compared with 54% of women in urban areas. The prevalence of FGM/C is third-highest in Wolaita (92.3%) (Central Statistical Agency (CSA) [Ethiopia] and ICF, 2016:45).

Table 2.4: Prevalence of FGM/C by Ethnic Groups and Residence²⁰

Background characteristic	Percentage of women circumcised	Number of women	Type of circumcision			
			Cut, not fleshed removed	Cut, flesh removed	Genital sewn closed	Number of women circumcised
Ethnic groups						
Afar	98.4	55	4.0	84.4	71.0	54
Amhara	60.5	2,328	3.2	60.8	2.7	1,409
Gurage	78.3	205	6.9	78.2	2.7	160
Hadiya	92.3	184	1.2	92.9	12.6	170
Oromo	77.1	2,693	1.8	84.7	1.9	2,076
Sidama	87.6	321	1.3	97.1	2.1	281
Somali	98.5	220	1.7	97.3	75.6	217
Tigray	23.0	565	10.4	49.0	5.3	130
Wolaita	92.3	234	5.9	93.5	0.0	216
Other	38.1	1,018	1.3	90.1	4.1	388
Residence						
Urban	53.9	1,714	4.6	72.0	8.4	924
Rural	68.4	6,108	2.2	80.9	6.1	4,177

²⁰ Central Statistical Agency (CSA) [Ethiopia] and ICF. 2016. *Ethiopia Demographic and Health Survey 2016: Key Indicators Report*. Addis Ababa, Ethiopia, and Rockville, Maryland, USA. CSA and ICF, 45

Ambachew, Melisew and Tesfaye (2015:122) find that FGM/C is one of the most common harmful traditional practices (HTPs) in Ethiopia, particularly in Southern Nations, Nationalities, and Peoples' Region (SNNPR). Nevertheless, the prevalence of FGM/C has reduced in SNNPR from 72% in 1997 to 56% in 2008 (as cited by Abel, 2012) and to 30.8% in 2007 according to EGLDAM report based on the 2007 follow-up survey on HTPs and aligned data of 2005 EDHS. Thus, the prevalence of FGM/C in SNNPR has reduced from the 2007 and it is currently at 21% with some difference among the administrative zones and special woredas (cf. Ambachew, Melisew and Tesfaye 2015:133). However, I am personally less convinced on the postulation according to which, FGM/C is reduced in SNNPR because there is conflicting evidence and the 2016 study found that the prevalence of FGM/C in SNNPR is as high as 62% (Central Statistical Agency (CSA) [Ethiopia] and ICF, 2016:45).

Table 2.5: Prevalence of FGM/C by Region²¹

Region	Percentage of women circumcised	Number of women	Type of circumcision			Number of women circumcised
			Cut, not fleshed removed	Cut, flesh removed	Genital sewn closed	
Tigray	24.2	540	13.0	46.6	7.1	131
Afar	91.2	67	8.0	84.8	63.6	61
Amhara	61.7	1,826	1.8	57.7	2.8	1,127
Oromia	75.6	2,881	2.0	85.4	1.6	2,178
Somali	98.5	229	1.9	97.2	73.1	225
Benishangul-Gumuz	62.9	75	6.2	69.1	3.2	47
SNNP	62.0	1,653	2.8	93.0	4.3	1,024
Gambela	33.0	22	6.6	46.1	4.8	7
Harari	81.7	18	0.6	96.7	4.5	15
Addis Ababa	54.0	466	5.1	66.5	1.4	251
Dire Dawa	75.3	47	4.4	86.8	10.1	35

²¹ Central Statistical Agency (CSA) [Ethiopia] and ICF. 2016. *Ethiopia Demographic and Health Survey 2016: Key Indicators Report*. Addis Ababa, Ethiopia, and Rockville, Maryland, USA. CSA and ICF, 45

2.5.2. The Prevalence of FGM/C and Gender-Based Violence in Wolaita

FGM/C is regarded as a form of gender-based violence (GBV). GBV includes but is not limited to physical, sexual and psychological violence (including suffering, intimidation, deprivation and/or coercion of liberty in the family and community and also perpetrated by the state) (White & others, 2002:22). As it were, GBV affects primarily the health and well-being of women and girls. It has shocking effects upon their quality of life, dignity and health, and it contributes to the impoverishment of families and communities. For this reason, GBV is one of the most serious global health problems since it is a direct cause of death for women and girls (Norwegian Church Aid, 2009:1). In Ethiopia, many women and girls are suffering from HTPs such as FGM/C, early marriage, rape, and the like, and according to the Norwegian Church Aid (2009:1), FGM/C has brought lifetime suffering to millions of girls and women in the country.

The *Kembatti Mentti Gezzimma* (KMG),²² Kembatta Women Standing Together, conducted a study²³ to provide basic information on gender-based and other forms of violence in Wolaita (KMG, 2011:60). The survey shows that women's rights violations are highly prevalent in Wolaita, taking the form of FGM/C, girls' abduction, rape, early marriage and widow inheritance, and the low socio-economic status of women (KMG, 2014:3). In Wolaita, when parents cannot afford to cover education expenses they keep their girl children at home to carry out the domestic activities. A woman faces different forms of violence and stigma and discrimination inside and outside her home. Girls and women are victims of domestic violence related to their reproductive and sexual rights, whenever they try to negotiate on their reproductive health rights with their husbands (KMG, 2014:3).

²² KMG (Kembatti Mentti Gezzimma), Kembatta Women Standing Together, is founded by the two sisters, Bogaletch and Fikrte Gebre, who grew up in rural Ethiopia where gender-based violence including FGM/C was endemic. To make the abandonment of FGM/C a reality and practical on the ground KMG "has been operating in two regions of the country which comprises 25 Districts and two towns. In SNNPR, Seven Districts and one Zonal town Durame city of Kembatta Tembaro Zone, Five districts of Gamo Gofa and Segen Akababi Zone, Two Districts of Gurage Zone, five Districts of Wolaita Zone, Derashe and Konso special district and Sidama district. In Oromia region, we are operating in two districts of West Arisi Zone. All the operational areas except Kembatta Tembaro Zone are the Scale up areas" (KMG-Ethiopia, 2014:1)

²³ The study includes both quantitative and qualitative methods, and 1040 women interviewed from only four woredas of Wolaita zone: Damot Sore, Boloso Sore, Kindo Koysha, and Damot Fulasa (KMG-Ethiopia, 2011: vii).

Furthermore, Wolaita women cannot decide on the number of children to have, however, the burden in caring for children lies on their shoulders. The tradition has prohibited them from securing their land ownership rights. Even when they get their own share they are not the one benefiting from the asset. Though the law is there, law enforcement agents, religious and community leaders place a great deal of pressure in order to safeguard traditional healers and perpetrators instead of protecting the rights of the victims (KMG, 2014:3). In Wolaita, women experience the most common form of violence such as physical violence 64.1%, psychological abuse 61.1%, sexual violence 58.6%, and economic neglect or abuse 57% (KMG, 2011:28). Many of women in Damot Sore experienced all types of violence compared to the other woredas (KMG, 2011:28). The following table shows the gender-based violence by major types in four woredas of Wolaita.

Table 2.6: Types of gender-based violence ever experienced by women in four woredas of Wolaita²⁴

Variable	Damot Sore	Boloso Sore	Damot Fulasa	Kindo Koysha	Total
Physical violence	90.6	62.7	65.1	29.1	64.1
Psychological violence	92.3	57.6	67.4	20.2	61.1
Economic neglect/abuse	85.5	54.9	58.1	21.1	57.2
Sexual violence	90.6	55.7	66.7	14.3	58.6
n	311	375	129	223	1037

Almost all the women in all study areas have heard about FGM/C. The data also indicates that four in five women in the study area have undergone the practice, with figures ranging from 55.1% women who have experienced FGM/C in Damot Fulasa to 92% in Kindo Koysha woredas (KMG, 2011: viii). The following table explores the knowledge and recent practices of FGM/C in four woredas of Wolaita zone.

²⁴ KMG, 2011. *Baseline Survey on FGM and other Forms of Gender-Based Violence in Five Intervention Woredas of Wolaita Zone, SNNPR, Ethiopia*, Addis Ababa, Ethiopia, 28

Table 2.7: Knowledge and recent practices of FGM/C in four woredas of Wolaita zone²⁵

Variable	Damot Sore	Boloso Sore	Damot Fulasa	Kindo Koyssha	Total
Ever heard of female circumcision	99.7	97.6	99.2	96.9	98.3
Have you yourself ever been circumcised?	82.1	86.1	55.1	91.9	82.4
Regarding FGM, what is your stand					
Should be continued	43.7	31.9	10.0	46.6	37.3
Should be stopped	56.3	68.1	90.0	53.4	62.7

The practice of FGM/C is continued in Wolaita. More than one in three women (37.1%) believed that FGM should be continued ranging from 10% respondents in Damot Sore to 46.6% in Kindo Koyssha woredas (KMG, 2011:41). The practice of FGM/C is prevalent in Wolaita with slight decrease in some woredas. However, the study also shows that a high proportion of women wants to continue the practice of FGM/C on their daughters in the future (KMG, 2011:x). Moreover, all forms of violence in life time and during the 12 months preceding the survey were found highly prevalent in all study areas with, as expected, husbands to be the most frequent perpetrators of the violence. In some areas, lethal violence had been reported (KMG, 2011: ix). The following quote, the participant's explanation in KMG's study, expresses how FGM/C perpetuated by Wolaita culture:

“Though the community is well aware of the legislation banning FGM, it is still widely practiced but it is done behind closed doors. I also allowed my daughters to undergo FGM since it was very hard to break the custom and culture of my society. A woman who is not circumcised is even discriminated in religious institutions, in markets and other social gatherings” (KMG, 2011:47).

2.5.3. Ethiopian Government Efforts to eradicate FGM/C

FGM/C is one of the HTPs that has negative effects on the health and well-being of girls and women. With this awareness, the Ethiopian government has been working to eradicate the practice

²⁵ KMG, 2011. *Baseline Survey on FGM and other Forms of Gender-Based Violence in Five Intervention Woredas of Wolaita Zone, SNNPR, Ethiopia*, Addis Ababa, Ethiopia, 40

of FGM/C through its criminalization and awareness-creation measures. In addition to FGM/C, the government is attempting to address violence against women and children by a National Steering Committee that is meant to offer multi-sectorial response to the issue. As part of the measure, there is a legal and care centre that provides integrated services to children and women who are the victims of the sexual violence (Federal Democratic Republic of Ethiopia, 2014:100).

Moreover, the Ethiopian Women Affairs has an independent budget allocated from the House of Peoples' Representatives. The Government has formed a Universal Forum composed of representatives from different sectors such as the Ministry of Justice, the Courts, and the Police to address sexual violence and HTPs. A National Strategy and Action Plan that focuses on Eliminating Harmful Traditional Practices and FGM/C, has been adopted and circulated to regional states and federal cities. The government has organized many workshops and awareness-creating activities and experience-sharing programmes in combating FGM/C in different parts of the country, particularly in Afar and Somali where the prevalence is very high. Television and radio programmes are broadcasting on the physical, psychological and social effects of FGM/C (Federal Democratic Republic of Ethiopia, 2014:100-101).

Therefore, the Ethiopian government is engaged in the struggle against FGM/C, and has planned to eliminate FGM/C by 2025. The Ethiopian Ministry of Health is contributing to reaching this goal, primarily by focusing on two major points, namely prevention of FGM/C practices done by health extension workers. It is also contributing by treating girls and women who live with the complication of FGM/C (The Democratic Republic of Ethiopia Ministry of Health, 2016: iii).

Legislations that prohibit FGM/C have been signed into law. According to the Constitution of the Federal Democratic Republic of Ethiopia Article 35 (4): Rights of Women, "the state shall enforce the right of women to eliminate the influences of harmful customs. Laws, customs and practices that oppress or cause bodily or mental harm to women are prohibited" (Federal Negarit Gazeta, 1995:11). Moreover, the Criminal Code of the Federal Democratic Republic of Ethiopia Article 565: Female Circumcision states that "whoever circumcise a woman of any age is punishable with simple imprisonment for not less than three months, or fine not less than five hundred Birr" (The Federal Democratic Republic of Ethiopia, 2005:332). The Article 566 – Infibulation of the Female Genitalia also states that:

“(1) Whoever infibulates the genitalia of a woman is punishable with rigorous imprisonment from three years to five years.

(2) Where injury to body or health has resulted due to the act prescribed in sub-article (1) above, subject to the provision of the Criminal Code which provides for a more severe penalty, the punishment shall be rigorous imprisonment from five years to ten years” (The Federal Democratic Republic of Ethiopia, 2005:332).

In Ethiopia, all the important policy documents indicate that there is a very favourable framework for action against FGM/C. All the international instruments are applicable for the eradication of FGM/C in Ethiopia. The international human rights instruments take a central place in the domestication of Ethiopia’s legal system. Nevertheless, it appears that Ethiopians are not taking the advantage because the international standards and norms are less known and accessible in the country (Norwegian Church Aid, 2009:7).

Despite all these measures, the practice of FGM/C continue in the country.

2.6. Conclusion

FGM/C constitutes all procedures that remove the partial or total external female genital or damage to the female genital organs for non-medical reasons. The practice causes severe consequences for health including both the immediate and long-term complications. With this awareness, the Ethiopian government is engaging in the struggles against FGM/C in order to promote the flourishing of women in Ethiopia. In this regard, FGM/C violates the injunction of the Ethiopian constitution (the International agreements in protecting and promoting of human rights) of “do no harm”, and the practice is therefore unethical by any standards.

Although FGM/C is mainly carried out by traditional practitioners, health workers are also involved in performing the practice. However, it is important to note that FGM/C, whether carried out in hospital or any other modern setting, is an intentional damage, for non-medical reasons, to healthy organs of girls and women (The Democratic Republic of Ethiopia Ministry of Health, 2016:12-7). Motivations for the practice of FGM/C are complex and related to each other. However, controlling women’s sexuality is one of the main motivations to perform FGM/C in Ethiopia, particularly in Wolaita, which is highly a patriarchal society (Yayehyirad, 2008:107).

The next chapter will discuss the notion of flourishing and give particular attention to flourishing from a theological perspective.

Chapter Three

Flourishing at the Intersection of Gender, Health, and Theology

3.1. Introduction

This chapter focuses on the notion of flourishing and gives particular attention to flourishing from a theological perspective. The chapter has four main parts with brief explanations. The first section will discuss the term flourishing, the source of human flourishing, and the centrality of human flourishing. The second section will look at African Feminist theology as embodied theology. This section includes African feminist cultural hermeneutics, African critique of eccentric flourishing and flourishing as critique of dualistic notions of salvation. The third section explores the flourishing of women in the Ethiopian context (*Maccasaa Zoxissuwa*). The previous sections discuss flourishing as critique of dualistic notions of salvation and flourishing as a balanced metaphor or a holistic understanding of salvation. Therefore, the last section explores how flourishing as a holistic understanding of salvation interconnected with the embodied approach of African Women Theologians at the intersections of gender, development and theology.

3.2. What is Flourishing?

The root meaning of the term ‘flourish’ derives from the Latin word *florire* or *florēre* and from the Anglo-French word *fluriss*, which means ‘to flower’ according to the Merriam-Webster’s Collegiate Dictionary and Thesaurus (2010). As it were, all human beings have an intrinsic potential to flourish. According to the Oxford Desk Dictionary and Thesaurus American Edition (2001), flourishing implies the capacity to live fully and grow in the here and now, in a holistic and healthy way within a favorable environment. Flourishing happens in both individual and communal states (Santos, 2017:235).

It cannot be overemphasized, therefore, that human flourishing is gaining increasing ground in several disciplines such as anthropology, philosophy, positive psychology, theology, ecology, and healthcare. Contemporary social and moral philosophers reflect on the notion of Aristotle regarding eudemonia (wellbeing) as the good life that comes from virtuous activity. Flourishing is perceived as wellbeing and holistic health of the individual in the field of healthcare and nursing. In the field of positive psychology, welfare, happiness, and flourishing are the main issues that

attempt to shift the focus from mental illness (pathology and disease) to positivity (wholeness and accomplishment). In these all attempts, the central point is personal wellbeing that emanates from success, a good life, cultivation of virtues and strengths. Santos (2017:234), however, appears less convinced that this has led to abundant life for all (Santos, 2017:234).

According to Kelsey (2008:2), “to flourish” has two meanings, namely “to blossom” and “to thrive”. The first meaning, “to blossom”, is to manifest beauty by providing “fruit” (for present neighbours) and “seed” (for future neighbours). The other meaning, “to thrive” in terms of sociality and responsibility - human beings are responsible for themselves, non-human neighbours, and the earth and her ecology (Kelsey, 2008:2-3). This twofold definition of human flourishing is further elaborated through the five characteristics of human flourishing. First, flourishing is contextual and concrete, which explains why it is a highly relative concept. Second, flourishing is not functional (because that would reduce human beings to that which they are able to think or do) or self-referencing (because would mean it is only concerned with itself). Third, flourishing is a gift (that is, it is God’s relationship to human beings). Fourth, flourishing is relational and responsive (that is, it has to do with human beings’ relationship to God). Lastly, flourishing is eccentric (that is, having your centre outside yourself) (Marais, 2015:133-134). Since flourishing is contextual what is meant by flourishing in the West, may not probably meant the same thing in the context of the Wolaita people of Southern Ethiopia.

Nevertheless, flourishing is a biblical concept. It is clearly a theme of both Wisdom literature and the biblical prophets (Psalm 92:12, Proverbs 14:4, Zechariah 9:10-17, and Hosea 14:3-7). Although the specific term flourishing is not mentioned in the New Testament the concept is still manifested (Ephesians 3:19–20, 2 Corinthians 9:8, John 10:10, and John 15, the Gospel of John particular) (Santos, 2017:234, Trisk, 2012:261).

3.2.1. The Source of Human Flourishing

Volf (2011:56) argues that human flourishing is a gift that comes from the God of love. However, he notes that many people in the West feel that they flourish when they experience satisfaction. As a result, they began to link the flourishing of human beings with the experience of human satisfaction and believe that their experiential satisfaction is the very definition of flourishing (Volf, 2011:57). This explains why Volf (2011:57) argues that “Such people cannot imagine

themselves as flourishing if they do not experience satisfaction, if they don't feel happy, as the preferred way of expressing it goes. For them, flourishing consists in having an experientially satisfying life”.

However, the love of God and universal solidarity are the centre of human flourishing. That is to say, human beings are truly happy and flourish when God is the centre of their lives. This is because God is the source of everything that is good, beautiful, and true. In view of this, all created things should be loved. Yet, the only way to love them properly and enjoy them fully is through loving and enjoying them ‘in God’ as Volf (2011:58) concludes. In this same vein, Volf quotes from Augustine’s work *On the Trinity* as follows:

God is the only source to be found of any good things, but especially of those which make a man good and those which will make him happy; only from him do they come into a man and attach themselves to a man (Augustine, *Trinity* 13.10 in Volf, 2011:58).

Here, Augustine finds that those who have everything they want are happy, and that this is what constitutes happiness for most people. Augustine adds, however, that this is only true if they want ‘nothing wrong’. This means what they want should be in accordance with the will and character of their Creator, whose actual being is love (Volf, 2011:58). The proper content of flourishing is, therefore to be found in loving and enjoying God and neighbours (Volf, 2011:58). For Augustine, flourishing is a “completely harmonious fellowship in the enjoyment of God, and each other in God” (Augustine, *City of God* 19.17, as cited by Volf, 2011:58).

However, a different account of human flourishing emerged around the eighteenth century in the West (Volf, 2011:58). Some scholars describe the new account as an ‘anthropocentric shift’, gradually changing the interest from God to human beings and their affairs (Volf, 2011:58-59). Most ancient human ethics make reference to something higher which human beings should love or reverence or acknowledge, however, the new humanism, with its notion of human flourishing, unlike ancient ethics makes no reference to something higher. This ‘something higher’ is God for both Augustine and traditions that followed him. This new humanism indeed embraces the moral obligation to love neighbours but rejects God and the command to love God. The key pillar in the notion of having “the good life” is a universal beneficence to all human beings, but not limited by the boundaries of nation or tribe (Volf, 2011:59).

Furthermore, humanity is viewed as proceeding towards interdependent human relations in which the flourishing of each is connected to the flourishing of all; and the flourishing of all is connected to the flourishing of each. Nevertheless, another shift occurred in the late twentieth century. In this time, human flourishing became more closely linked to experiential satisfaction. Though, other explanation regarding flourishing continue to exist whether they are based on secular or religious interpretations of the world (Volf (2011:59). As a result, in the twentieth century, the reference to universal solidarity is also lost, much as the reference to ‘something higher’ was previously lost. Thus, as Volf (2011:59-60) further finds, the only thing that remained in the notion of flourishing is a desire for the experience of satisfaction and concern for the self.

This does not mean individuals seek just their own pleasure in isolation from society. It also does not mean individuals do not care for others. People are very much engaged, however, in this understanding they mainly focus on serving an individual’s experience of satisfaction (Volf, 2011:60). In other words, “desire – the outer shell of love – has remained, but love itself, by being directly exclusively to the self, is lost” (Volf, 2011:60). In Volf’s (2011:60) understanding the conception of human flourishing has three phases: love of God and neighbour, universal beneficence, and experiential satisfaction. Volf (2011:60) describes the three phases “as a history of the diminution of the object of love: from the vast expanse of the infinite God, love first tapered to the boundaries of the universal human community, and then radically contracted to the narrowness of a single self – one’s own self”.

Although satisfaction is very important with regard to flourishing, there is dissatisfaction in the midst of experiencing satisfaction. Sometimes people compare their “pleasures” to others and begin envying them (Volf, 2011:61). There are two main reasons for the dissatisfaction in the midst of experiencing satisfaction. Firstly, human beings are self-transcendent - in our imagination we always go beyond any state that we have reached. “Whatever we have, we want more and different things, and when we have climbed to the top, a sense of disappointment clouds the triumph. Our striving can therefore find proper rest only when we find joy in something infinite. For Christians, this something is God” (Volf, 2011:62). Secondly, our pleasure is truly human, so it is pleasurable only if the pleasure has meaning beyond itself. When human beings place the centre of their pleasure in “the good life” it decouples the pleasure from the love of God, the ultimate source of

meaning. Therefore, they should serve their pleasure from love of neighbours and hope from a shared future (Volf, 2011:62).

Therefore, Volf (2013:28) rejects the notion according to which flourishing consists in being experientially satisfied. Instead, Volf suggests that humans will be experientially satisfied when they truly flourish. In a Christian sense, hope is perceived as love that stretches itself into the future. When we enact hope, we are expecting something from the future. But that does not mean we do not hope for everything we expect. Although both optimism and hope deal with positive expectation they are very different things (Volf, 2013:13). There is a difference between optimism and hope:

Optimism has to do with good things in the future that are latent in the past and the present; the future associated with optimism – Moltmann calls it *futurum* – is an unfolding of what is already there. We survey the past and the present, extrapolate about what is likely to happen in the future, and, if the prospects are good, become optimistic. Hope, on the other hand, has to do with good things in the future that come to us from ‘outside’, from God; the future associated with hope – Moltmann calls it *adventus* – is a gift of something new. We hear the word of divine promise, and because God is love we trust in God’s faithfulness, and God brings about ‘a new thing’... more generally, the good that seemed impossible becomes not just possible but real (Moltmann, 1996:25 as cited by Volf, 2013:13-4).

Moreover, it is believed that hope is the expectation of good things that come as a gift from God, and that is love too. Love gives always gift and it is a gift by itself, and every genuine gift is also an expression of love. At the centre of the hoped future there is the flourishing of humans, communities and the entire world. Nevertheless, one of the challenging questions in Christian theology is this: how does God relate to human flourishing? (Volf, 2013:14). According to Volf (2013:29), loving God and loving neighbour are the two central points in human flourishing. This is a theological echo that rings in the two verses of the Bible: “God is love” (1 John 4:8) and “You shall love the Lord your God with all your heart, and with all your soul, and with all your strength, and with all your mind; and your neighbour as yourself” (Luke 10:27) (Volf, 2013:29).

It should be noted that there are three main challenges regarding the flourishing of humans. First, Christians should explicate God’s relation to human flourishing with regard to several concrete issues that we face today, namely from bioethical issues to international relations, from poverty to

climate change, from sexuality to governing, and so on. Second, Christians should make credible the claim that the love of God and neighbour is crucial to human flourishing. Lastly, truly believing God as fundamental to human flourishing is the most difficult challenge for Christians. We may say that God is the secret of our flourishing, but could we have meant it? Today this is the most fundamental challenge for all Christians, namely priests and ministers, theologians, and Christian lay people (Volf, 2013:30).

3.2.2. The Centrality of Human Flourishing

The notion of human flourishing is at the centre of the great faiths (including Christianity). The survey of the history of the great faiths illuminates that their goal attempts to dispatch people out of this world and into the next. For example, Christianity attempts to take people out of the earthly sufferings into the heavenly blessings, while Buddhism strives to take people out of craving into nirvana (Volf, 2013:21). Today Christian theology faces two challenges, namely addressing the violation of the dignity of human beings and confirming that God's power does not contradict with human flourishing (Marais, 2015:129). David Kelsey's (2008:2) theological anthropological work is important in order to reimagine human flourishing in considering these two challenges.

Kelsey chooses for a theocentric perspective of human flourishing in dealing with the challenges (Marais, 2015:131). In this analysis Kelsey's work will be looked at through three points: namely the context of the theological conversation on human flourishing, the meaning of human flourishing, and the implication of the theological vision and language of human flourishing (Marais, 2015:129). The theological vision and language of flourishing is understood as expressing God's glory and revealing the glory of being-connected-with by God. In short, flourishing is being "fully alive" (Marais, 2015:130). The affirmations of Christian theology about God and God's ways of relating to human beings underwrite human flourishing, however, in the context of 'postmodernity' there is a widespread attempt among Christians to magnify God's power at the expense of human flourishing and freedom. It is believed that the Christian faith makes humans very weak, small, docile, and servile (Marais, 2015:131).

According to Kelsey (2008:1), the vision and language of flourishing is deeply embedded within theological anthropology. Flourishing is based on two claims, namely God relates to all that is not God and human beings are the manifestation of the glory of God. The fundamental theological

claim states that the three interrelated ways in which God relates to all that is not God through creation, eschatological consummation, and reconciliation (Marais, 2015:131). However, creation, eschatological consummation, and reconciliation describe the three narratives of how God relates with human beings, the earth, and ecology, but that does not mean they are the only ways that God relates. These three ways tell the story of God's relationship with all that exists, and this is the core theological idea in Kelsey's theological anthropology (Marais, 2015:133).

Human flourishing cannot be separated from God's relationship to human beings because human flourishing is always dependent on God. "For Kelsey, flourishing makes no sense, has no meaning or coherence or content or power, apart from the confession that God stands in a relationship with human beings and that it is God that initiates this relationship" (Marais, 2015:133). Therefore, the confession that God relates to human beings is the first claim that grounds the flourishing of humans (Marais, 2015:133). Kelsey (2009:310) also argues that the flourishing of human beings is systematically connected to the glory of God. The flourishing of human being based on the confession that "the glory of God is human beings made fully alive" (Kelsey, 2008:2). Therefore, human beings express God's glory is the second claim that grounds the flourishing of humans (Marais, 2015:133-4).

3.3. African Feminist theology as embodied theology

While male theologians such as Kwame Bediako, John Mbiti, Lamin Sanneh, Laurenti Magesi, Kä Mana, and others are widely known, few African female theologians have received the attention and recognition they deserve in the academic world. Mercy Amba Oduyoye, the Ghanaian woman theologian, was the first black African woman theologian and her publications were read widely. Oduyoye²⁶ was also well known for her work at the World Council of Churches (WCC), as she served as deputy general secretary of the WCC, and youth education secretary in the Christian Education and Youth Department of the WCC (Landman, 2017). More recently, Mary Getui, Anne Nasimiye-Wasiki, and Teresa Okure are among the few female scholars who have publications.

²⁶ Oduyoye also served for many other ecumenical organizations such as cofounder of the Circle of Concerned African Women Theologians, president of the Ecumenical Association of Third World Theologians (EATWOT), and youth secretary of the All Africa Conference of Churches (AACC). Landman, C. "Mercy Amba Ewudziwa Oduyoye: Mother of Our Stories," *Studia Historiae Ecclesiasticae* 33, no. 2 [Online], Available from: <http://www.christina-landmaneo.za/mercy.htm> Accessed [2017, 12 March].

Recently the work of Musa Dube, the Biblical scholar, has received world-wide recognition (Frederiks, 2003:66).

The works of Nyambura Njoroge²⁷, Musimbi Kanyoro, Isabel Phiri and Louise Tappa (amongst others) are also recognised in global organisations such as World Alliance of Reformed Churches, the Lutheran World Federation, and the Ecumenical Association of Third World Theologians. In addition to these women, many other African women theologians have made an incredible contribution to African theology. Several hundred women engage in the Circle of Concerned African Women Theologians²⁸ which focuses mainly on research and publication, although it should be noted that only few have managed to publish their research and with this to make their voices heard (Frederiks, 2003:66).

Oduyoye is often recognized as the matriarch of African feminist theology and this is of course in large part due to her role in founding a network of African female theologians, namely the Circle of Concerned African Women Theologians (Frederiks, 2003:66)²⁹. It is believed that in one way or another most of African feminist theologians are associated with the Circle of Concerned

²⁷ Nyambura Njoroge known for her ethics of resistance and transformation that gives concert way forward which is applicable for the average African woman. Njoroge proposed different theologies and hermeneutical principles. Unlike, Oduyoye and other African feminist the proposed abstract principles of liberation and justice, Njoroge offers concrete methods of resistance and protest for her readers to change their situation. For instance, through her research about Gikuyu women in Kenya that promotes the protests against FGM/C and her study of the person of Rispah, Njoroge provides applicable and accessible tools to ordinary African women in order to support them as they engage in struggle against the power structures that oppress or marginalize them. Therefore, Njoroge suggests a clear way to transform society. Frederiks, M. 2003. *Miss Jairus speaks: developments in African feminist theology*. Exchange, 32 no. 1, Koninklijke Brill NV, Leiden, 81.

²⁸ The Circle of Concerned African Women Theologians is a network across Africa in which African feminist theology develop through conferences and book publications. As other ‘third-world’ network, the Circle is hampered with the difference of language that is imposed by the various colonizers. In African continent, this particularly means the gap between Franco-phone Africa and Anglo-phone, while the English-speaking Africa seems to be more organized. Recently the Circle began to focus on conferences and publications that address religion and HIV/AIDs in Africa (a disease which is affecting many African nations), and the issue of gender, particularly the relation of women. Ruether, R. R. 2012. *The Development of Feminist Theology: Becoming Increasingly Global and Interfaith*. Feminist Theology, Vol. 20(3). UK: Sage Pub. 187-8.

²⁹ “The actual initiation of the Circle of Concerned African Women Theologians took place in 1989 when Mercy Oduyoye called together a group of women at Trinity College in Legon, Ghana around the theme: Talitha Cum! Daughters of Africa arise! The theme referred to the story of the nameless daughter of Jairus who was raised from the dead by Jesus with the words: Talitha Cum! (Luke 8:40ff). Like this little girl, called Ms. Jairus by African women theologians, African women without a name, often associated with illness and without a profession, were challenged to get up and speak.” Frederiks, M. 2003. *Miss Jairus speaks: developments in African feminist theology*. Exchange, 32 no. 1, Koninklijke Brill NV, Leiden, 70.

African Women Theologians (Frederiks, 2003:71). The Circle encourages African women to engage in research and writing and Oduyoye indeed promotes women's contribution in African theology and she uses her famous statement: 'a bird with one wing cannot fly'. African female theologians uphold that unless women's voice is included African theology is not complete and thus handicapped. In this way, African women theologians' works create 'the missing wing' by doing theology in Africa. Although Oduyoye's advocacy has a valuable contribution in developing feminist theology in Africa it is not *ex nihilo* (come out from nothing) (Frederiks, 2003:66).

According to Nyambura Njoroge (2002:42-50), there are four movements that encouraged African women to talk about their theological views and claim their rightful places in the church. These movements include the missionary movement, the feminist and women's movement, the ecumenical movement, and the liberation movement (Frederiks, 2003:67-9). African feminist theology has often been termed African feminist liberation theology. African feminist theologians do not merely seek to give a voice to voiceless rather they confirm what women have already expressed about their inner feelings and experiences of sorrow in stories, novels, dances, songs, deep silences, tears, and by striping their bodies. However, these voices have not get garnered significant enough attention from their churches. With this kind of awareness, in recent years African feminist theologians have begun to attempt to translate these voices into books and articles in order to challenge the churches to engage in dialogue with women and their experiences in order to find solutions and strive towards full humanity (Frederiks, 2003:71-2). Oduyoye (2000:148) states the need to deconstruct theology in Africa as follows:

As we Africans re-read the Bible and books on Western missionary theology, we unmask their ideological components, but we draw toward the ecumenical truths they embody and are thereby needing to move to re-interpretation and re-statement and to uncover aspects of the truth that may have remained concealed to the Western mind.

Oduyoye attempts to distinguish the characteristics of African feminist liberation theology under the general umbrella of liberation theology. First, African feminist theology is described as a narrative theology. Since stories are considered as a source for theology story telling³⁰ is very

³⁰ In African community, traditionally story telling is mainly considered as a woman's affair. Stories are educational and a means to teach the listeners, to warn them, to guide them and to give meaning to events in their lives. Feminist theologians are very interested in story telling because it is a woman's medium and it has a great function in African community. Since most of the stories are painful the story telling becomes a narrative therapy for narrator. Thus,

important in doing theology. Feminists believe that story telling make women “from being observers and victims into participants and actors in history. As such the sharing of a story is a form of witness, practicing ‘a theology of witness’. It is a step towards encouraging others to share stories and by this sharing empowering each other to transform society” (Frederiks, 2003:72). Second, African feminist theology is described as a theology of relations. When women analyse stories (whether Biblical or otherwise) they question the story to understand the interaction and relationship among different actors and improvement of these relationships by making the community more holistic (Frederiks, 2003:73).

As alluded to in previous sections, the goal of the struggle for liberation is not just a liberation for women but it is a liberation for all (that includes women and men, individuals and societies). Unless all are liberated - full humanity cannot blossom or flourish. This means that African feminist theology is socially sensitive, life affirming, and geared towards dialogue. The relations include the entire natural realm and it, not limited among human beings. African feminist theology is, therefore, also sensitive to ecology (Frederiks, 2003:73). Third, African feminist theology is clearly contextual. In Africa, women use different sources for their theology, namely Christian Scripture, their real-life experiences and the oral traditions (‘unwritten scriptures’) of the various ethnic groups. Through liberating and empowering view women attempt to translate the sources into a theology that supports them to address the contemporary life challenges in Africa (Frederiks, 2003:73).

African feminist theologians have gone one step further than most of their male counterparts regarding the contextualization of theology. For this reason, African feminists argue that the cultural context is gender biased but not neutral. Thus, they suggest that it should be handled with suspicion and care. This means there is a need for ‘an engendered communal theology’. In this way, African feminist theology is described as a contextual liberation theology that gives special attention for relationships, storytelling, gender issues and the change of society (Frederiks, 2003:73-4).

telling stories perceived as a step that leads towards healing. Story telling is a way that distinguishes women academics from their male counterparts. Stories are powerful tools for a feminist cause. Frederiks, M. 2003. *Miss Jairus speaks: developments in African feminist theology*. Exchange, 32 no. 1, Koninklijke Brill NV, Leiden, 72-3.

In the 1980s, African feminist theology identified the two themes: culture and religion. In the wake of debates regarding theology as inculturation, African feminists became sensitive to the need for the realization of an inculturated and contextualized African theology due to the influence of culture on the position of women. African women theologians are better than their male counterparts in understanding culture was not neutral, particularly not gender neutral. The question of contextualizing the gospel, nevertheless proved difficult, because culture and religion were perceived as both a source of inspiration, and oppression/dehumanization. With this awareness, Njoroge suggests the need of ‘gospel-justice’ rather than ‘gospel-culture’ to African theology because it is common to see the great hardships of war, illness, famine, and economic exploitation in African continent (Frederiks, 2003:74).

Unfortunately, life in Africa is branded by a context of oppression, pain, death and despair, living with violence and living in slums. Thus, liberation and feminist theologians attempt to address this reality by attempting the kind of African theology that took the question of cultural hermeneutics and the theme of culture seriously. In the early period of African feminist theology, the descriptive articles were mainly focused on discussions of culture. Most of first generation articles addressed the traditional harmful practices to respond for the lack of the gender issue in the inculturation theology, and because of the influence of the World Church Council (WCC) Women’s Decade theme, ‘Violence against Women’ (Frederiks, 2003:74). Moreover, Frederiks (2003:75) states how FGM/C is addressed in African feminist theologian’s works as follows:

The book *Groaning in faith* gives a selection of articles describing traditional rites and practices such as female genital mutilation, widowhood rites and rights, death rituals, levirate marriages etc. among the various ethnic groups. A publication of the Kenyan Chapter of the Circle, *Violence against Women*, also addresses social and economic violence against women. No doubt the advocacy of the women's movement at large, and therewith also of feminist theology, has contributed to the fact that many of these cultural practices are now discussed in the open and some have been even abolished. For though Njoroge has shown that among the Gikuyu women circumcision became a controversy in the 1920s and Christian women were able to eradicate the practice among the Christian Gikuyu, in most other countries the practices still continue, despite governmental and NGO protests and prohibitions.

Following the first theme, culture, the International Planning Committee identified the second theme, religion, for the African feminist theology research in 1989. Thus far it was perceived that religion among African feminist theologians was mainly meant the Christian religion³¹. The other research concentrates on the interpretation of the Bible. Most of African feminist theologians still consider the Bible as their core source of inspiration. However, they are challenged with traditions and texts that are oppressive for women because the Bible was written in a patriarchal context. For this reason, feminist theologians ask the worth of individual texts as it is questioned by the canon as a whole. In view of this, African feminist biblical hermeneutics attempts to address two things, namely the authority of the canon (and how to deal with the misogynous texts) and the relevance of biblical texts to the lives of African women. In the latter case, African feminist theologians are striving to find alternative ways and via African and feminist methods of hermeneutics that suggests re-reading of the Biblical texts so that the texts speak in the African context (Frederiks, 2003:78).

Furthermore, there are different approaches in the struggle of African feminist theologians regarding the contexts of the Bible and the patriarchal texts. Some women assume as they maintain the whole text of the Bible, however, they highlight the positive elements in the texts and give just focus on the relation of Jesus with women, while ignoring other texts in the Bible. Others prefer a specific hermeneutical principle in reading the texts (Frederiks, 2003:78). In short, African feminist theologians are doing good work with regard to the biblical hermeneutics, and that includes both dealing with patriarchal texts and attempting to develop alternative ways for reading the texts.³²

Many scholars (see for example Frederiks, 2003 Kanyoro, 2002 Ruether, 2012, etc) note the progress of African feminist theology within the short period of its existence. It started with Mercy

³¹ Though, there are very few African feminist theologians who are Muslim, for example Sa'diyya Shaikh and Rabi'atu Amman are the most known. Furthermore, Nokuzola Mdebe and other South Africans are other African feminist theologian who claim their first membership in the African Traditional Religions. However, most of the African feminist theologians are Christian. The research of the topic that focuses on 'women and religion' classified into two divisions. The first group focus on the research that deals with the position of women in the churches and attempts to recover the contribution of women to African Church History (Frederiks, 2003:77-8). Frederiks, M. 2003. *Miss Jairus speaks: developments in African feminist theology*. Exchange, 32 no. 1, Koninklijke Brill NV, Leiden, 77-8.

³² Nevertheless, there remain unanswered questions in the background such as the authority of the Bible and its link with other alternative canons (Frederiks, 2003:78).

Amba Oduyoye, a single woman who is known to the world, but now the world knows many others. In article *Beads and Strands*, Kanyoro (2002:33-4) concludes that gradually a diversity of theologies is observed among African feminist theologians. Kanyoro calls this as a sign for the maturity of African feminist theology. In conclusion, Frederiks (2003:82) summarizes the development of African feminist theology as follows:

In 1989 a network of African Women Theologians, called the Circle, was started with the theme: Talitha Qumi! African women arise! After 25 years, with many publications of African feminist theologians on the shelves of the libraries, it seems fair to say, that the African sisters of Miss Jairus did rise and raised their voices. And now standing, they have no intention to sit down before their demands have been heard and answered.

3.3.1. African Feminist Cultural Hermeneutics

Kanyoro (2002) and Oduyoye (2001 and 1995) are the known African women theologians whose works are essential for defining feminist cultural hermeneutics. Asian feminist theologian Kwok Pui-lan (2001:15) notes that African women theologians developed cultural hermeneutics because it is a key tool to analyse their culture, religion and Christian heritage. Kanyoro (2002:9) describes cultural hermeneutics as analysis and interpretation that illuminates how culture conditions the understanding of people about reality at a particular time and location. Despite the fact that some cultural rituals are common in Africa, context and time have a significant role in any cultural analysis. This is because culture is neither static nor similar (Kanyoro, 2002:64). Cultural hermeneutics helps us to develop a mature cultural dialogue. The dialogue needs a safe environment with mutual vulnerability and mutual trust (Kanyoro, 2001:104). We should respond to the cultural practices by using feminist cultural lens, and without rejecting the indigenous knowledge that found in these practices (Siwila, 2015:69).

Cultural hermeneutics attempts to learn about the essence of cultural practices in relation to women's lives by questioning, examining and scrutinizing the practices (Siwila, 2015:69). According to Siwila, culture is the most authoritative cannon in the African worldview. Hence, any attempt that wants to change the cultural practices must consider the value attached to culture by those who give care for these practices. Because every culture has certain cultural elements that a community values as the lens that nurtures the community (Siwila, 2015:69). For example, FGM/C performed in Wolaita to suppressing women's sexuality. The practice is also aimed at

preventing women from being “sexy” and controlling their desire of sex (even from their husbands). It is also believed that FGM/C prevents premarital sex and loss of virginity (disgrace of the family) (Yayehyirad, 2008:107). Although FGM/C has severe effects on the health and well-being of women the idea of ending FGM comes with caution and fear of losing these societal norms. However, such kind of dilemma is mostly influenced by the fear of breaking cultural norms (Kanyoro, 2002:56).

African women have no unified voice on issues concerning culture. For example, there are disagreements with regard to how to respond cultural issues such as FGM/C, polygamy, dowry, the exclusive male inheritance of land, and the like. Some celebrate these practices as the essence of their culture, and therefore they consider the practices as the centre of their identity. In other words, the adherents of these practices believe that the practices help them to strengthen who they are and therefore the practices give them a foundation and a uniform community. However, others consider these practices as acts of injustice to women so that they advocate for change, because they regard these practices as oppressive and harmful practices that reduce women to instruments of men and culture. Therefore, these dilemmas continued to divide African women, however, the diversity of voices does not mean African women will be silent (Kanyoro, 2001:39).

In Africa, women are assumed as the custodians of cultural practices. African women attempted to guard cultural practices for generations due to the fear of breaking taboos (Kanyoro, 2001:37). Kanyoro (2001:37) notes that “many aspects which diminish women continue to be practised to various degrees, often making women objects of cultural preservation. Harmful traditional Practices are passed on as ‘cultural values’ and therefore are not to be dis-cussed, challenged or changed”. In the name of culture, harmful tradition practices such as FGM/C are perpetuated, and they are not liberating women. Women attempt to uphold consciously or unconsciously the patriarchal practices like FGM/C because they assume that “submitting” to the existing social setting is the only way to survive. This illuminates women’s powerlessness and vulnerability in the face of such kind of cultural prescriptions (Kanyoro, 2001:38).

3.3.2. An African Critique of Eccentric Flourishing

For Kelsey, all that is not God should be understood as “eccentric” (outside of itself), in a way in which God relates to all that is not God. Thus, Kelsey and Marias argue that the notion of

flourishing is primarily understood as “eccentric flourishing” (“having your centre outside yourself”) (in Marais, 2015:138). However, the researcher is less convinced of the notion of “eccentric flourishing,” because African women find their centre in their own experience (not just outside of themselves) and they do theologies with their whole beings. Women’s experiences are not merely their biological experiences such as menstruation, pregnancy, giving birth, and lactation, but also the experiences patriarchal domination and their resistance to bring the liberation are all vital sources for theological reflections. Women’s experiences serve as an organized system that assist the development of theological reflections without sexist distortions (Isherwood & McEwan, 1993:110)

Christian doctrines, such as that of flourishing, should be re-read through the stories of African women. In Africa, women’s experience of being persons is mainly defined in a relation to others (as mothers or wife). African women’s social status depends on these kinds of relationships, rather than on their achievements or any inherent qualities (Oduyoye, 2000:122). However, the African (the black) women’s experience was not perceived appropriately even in the women’s movement and feminist theology. With this awareness, Sojourner Truth attempted to convey how her white colleagues misunderstood the black women’s experience. The white women assumed that their issues were merely the same with the black women’s issues. For Sojourner Truth, sexism and racism were linked. Isherwood & McEwan (1993:119) for example confess the need to acknowledge the different ways in which women of color understand oppression: “Obviously, white women are slow learners, because women of color are still telling us that we are in danger of overlooking their experience” (Isherwood & McEwan, 1993:119).

Furthermore, “eccentric flourishing” is not only un-African, but also a concept that may be further deconstructed by feminists. In theological language about God, there is a tension between transcendence and immanence and, as argued by Rakoczy, the transcendent nature of God is often expressed in traditional male images of God such as Father, Creator, Lord, and so on with the result that God becomes very remote in women’s experience (Rakoczy, 2004:91). Moreover, God is at times experienced as source of women’s oppression, through institutions such as the church - the Christian tradition nevertheless wants women to love and obey this patriarchal God (Oduyoye, 1997:201). It appears that “eccentric flourishing” as currently defined may limit women’s freedom

to search God through their own experience³³. African women are still searching for the real God through their experience. But who is this God? Is there any possibility to rethink God or rediscover God?

In the book, *God's World, God's Body*, Jantzen³⁴ (1984:125) challenges the dualist traditions of Western theological thinking that separates God from God's creation, body from soul, and matter from spirit. Jantzen then suggests that we view God as embodied. In developing this thesis, Jantzen uses as a model the experience of human as embodied. Human beings are co-extensive with their bodies, but not reducible to their bodies. Humans transcend their body in their openness to reason, meaning and value, and in their emotions. With this analogy, Jantzen argues that God is co-extensive with the creation, but not reduced to it (Jantzen, 1984:125).

Jantzen (1984) further notes that the Western Christian philosophers of religion constructed a god who is an omnipotent patriarch who, detached from his creation, presides over the creation, who is male, rational, and disembodied. Therefore, Jantzen attempts to “create a god according to her gender” (Jantzen 1998:254). For Jantzen, God is “a name to describe the possibilities of awareness and transcendence” and “the horizon for human becoming” (Jantzen, 1998:12). Moreover, Arthur Green (2010:5), a scholar of Jewish mysticism and Neo-Hasidic theologian, fosters how we can rethink God:

For me God is not an intellectual proposition but rather the ground of life itself. It is the name I give to the reality I encounter in the kind of moment I have been describing, one that feels more authentic and deeply perceptive of truth than any other. I believe with complete faith that every human being is capable of such experience, and that these moments place us in contact with the elusive inner essence of being that I call ‘God’.

³³ Rakoczy (2004:93) notes that “some of the women who participated in the study did demonstrate a confidence in their own experience and a willingness and desire to keep searching for God as their lives unfolded...One woman stated that ‘God becomes part of your experience, this makes God real’” (Rakoczy, 2004:93).

³⁴ Grace Jantzen wrote 6 books in her shortened life. Unfortunately, she died in May 2006 from cancer while she was only 57. Jantzen's works illuminate her interest to disclose how we understand and speak about God. Though, her primary task is exploring who tells the story of God, but not much telling simply the story of God. Her writing illuminate “an increasing awareness of how our concepts of God have been shaped by people with power”. Trisk, J. 2008. *'Springs of Newness and Beauty' Grace Jantzen and the Search for God*. Scriptura 98, College of the Transfiguration, Grahamstown, pp. 194.

Christian theology, however, is a theology that focuses on the biblical God. As such, it becomes feminist theology when it has a special focus on women's lives, flourishing, hopes, stories, failures, and their complex experiences of oppression (Jones, 2000:14). African women find their centre in their own experience (not just outside of themselves), but the notion of "eccentric flourishing" limits their freedom to search God through their own experience. Therefore, the research believes that "eccentric flourishing" may even be considered both an un-African and un-feminist concept because it may possibly undermine women's experience. According to Jantzen (1998), feminist philosopher of religion, human beings have a natural potential and capacity for fruitfulness that originates from their inner resources and interconnection with one another. This interconnectedness of among the creations and the entire physical world reverses the isolation from dominance and mastery to kinship and interdependence (Jantzen, 1998: 151).

Furthermore, Jantzen writes about flourishing and connects the notions of flourishing and liberation by arguing that the oppressed can work together towards new relationships and structures that suggest liberation for everyone. However, this is possible if they resist the several ways in which the dominant ideology limits the possibility of other alternatives (Santos, 2017:234)³⁵. In this understanding inner capability is not the only thing that helps us to thrive, but we need an opportunity and possibility to be and live fully in the here and now. Thus, the inner capacity should be supplemented by a conducive environment and beneficial structure. The inner disposition and potential to flourish is given freely as gift and it is also a task that needs to be accomplished (Santos, 2017:235).

Although human beings are endowed with the fullness of life they are not able to enjoy it due to external pressures, oppression, violence, restrictions, and inner faulty or negative dispositions. The opportunity of fullness of life should be accepted, celebrated and shared with all. Since humans are relational beings in this interdependent universe their capacity to enjoy the fullness of life must be actualised only in relation to other humans and the entire ecosystem. Therefore, the relationship with oneself, others, and all creation is a key aspect in flourishing (Santos, 2017:235-236). "The ideal communities' feminists seek are inclusive; they encourage the flourishing of all – because,

³⁵ Unfortunately, Santos criticizes Jantzen's work by saying that it "remained more at the level of analysis and critique without offering any substantial insights towards flourishing" (Santos, 2017:234). Nevertheless, it appears that Santos's criticism is less convincing because it denies the incredible work of Jantzen and its significant insights towards flourishing.

as these theorists constantly remind us, no one will flourish fully until we all flourish together” (Jones, 2000:131). Flourishing implies an inner dynamic of growth through responsibility and mutual commitment to one another’s flourishing (Trisk, 2012:262).

Furthermore, Santos (2017:237) suggests a three-fold process, which includes: as compassionate connecting, creative conscientising, and collaborative capacitating in order to promote the flourishing of all (including the marginalized groups like women). The policy, advocacy, and resistance that promotes the flourishing of the marginalized and excluded should make sure that their voices heard, their rights acknowledged, and they can share cultural, religious, and social spaces with equality, freedom and dignity (Santos, 2017:237). When the stories of women and the marginalized, move from margins to the center they become empowered and their power restored (Bowers Du Toit, 2016:5). “Even though women on the margins have been robbed and deprived of a decent life, they exhibit great resilience in trying to survive and move beyond victimization. Most are even able to smile through their pain and suffering” (Santos, 2017:231).

3.3.3. Flourishing as critique of dualistic notions of Salvation³⁶

One of the strategies in interpreting human flourishing as human “well-being” includes interpreting human flourishing as human beings “healthiest” relationship to themselves, fellow beings, and their shared contexts. In this regard, Kesley (2008:9-15) considers wellbeing to be the same as health. This is why “well-being as health” can be a part of the content in the theological account of human flourishing. But that does not mean flourishing is defined as human well-being is understood as “health”, because both “well-being” and “health” are inadequate and problematic synonyms of flourishing (cf. Kelsey, 2008:9-15).

Jantzen’s (1984:125) theological work promotes the earth as the body of God by resisting the separation of God and material world. Following Plato (including Augustine and modern theology) the Western philosophical enterprise describes the divine in a way that is divorced from the material creation. This kind of assumption, however, excludes an understanding of God’s action in the world and suggests that human beings are not able to encounter God within the material world (Trisk, 2012:259-60). In this worldview, salvation is understood as a dogmatic theological

³⁶ This sub-section discusses critiquing a particularly dualistic understanding of salvation. The researcher attempts to promote the use of flourishing as a more holistic term, but not completely replace the theological notion of salvation.

truth, but not as a metaphor. Human beings are described mainly as mortal rather than natal and Christianity becomes more concerned with what happens after this life by treating this life as just a preparation for something better. Trisk (2012:259-60), therefore, argues for flourishing as a better metaphor than salvation:

Christian theology has become premised on our need to be rescued from this fallen and evil world by God who intervenes from outside to take us to our true home which is a place we go to after death. When these attitudes are linked to the prevailing sexist attitudes that link women to the body and men to the rational mind, the result is a deeply gendered ‘death symbolic’ in which, as many liberation theologians have noted, the focus on life after death distracts from engaging with daily struggles of women, the poor and the earth. She [Jantzen] thus suggests that the metaphor of salvation needs to be balanced with another metaphor, namely that of flourishing.

In fact, flourishing is a biblical and ecological concept that deals with persons in relation with God, human beings, and the earth. Flourishing is explicitly mentioned in the Old Testament (both Wisdom literature and the biblical prophets) and its concept also manifested in the New Testament (Santos, 2017:234, Trisk, 2012:261). Unfortunately, although the theme of flourishing is included in the Bible, Christian theology focus shifted completely to the metaphor of salvation, especially beginning from the Reformation theologians (Trisk, 2012:261-2). For this reason, Jantzen suggests a retrieval through the balancing metaphor of flourishing. When this is connected to Jantzen’s suggestion we give attention to nativity rather than mortality (Trisk, 2012:262).

Furthermore, there are five main points in suggesting the balancing metaphor of flourishing. First, flourishing is a positive concept that advocates fertile life, but salvation refers to rescue from a crisis. Second, salvation focuses on a heavenly existence by rescuing a select group of people (for *the coming life*) but flourishing promotes a careful fostering of connectedness and care in which every species blossoms (in *this life*). Since the entire ecosystem is interdependent one group (species) cannot flourish at the expense of others. Flourishing calls us to love this world and its creatures, but not to see the material world as evil.³⁷ Third, the metaphor of salvation requires

³⁷ Jantzen attempts to challenge the dominant patriarchal story of God in which philosophers and theologians concerned about violence and death, but not about beauty and flourishing. She suggests that we should treat nativity and the emergency of this world and this life as we treat mortality and strive for other worlds with a good philosophical seriousness and respect (Jantzen, 1998:2)

rescue by someone who come from outside the crisis situation³⁸, but the metaphor of flourishing implies an inner dynamic of growth through responsibility and mutual commitment to one another's flourishing (Trisk, 2012:262).

Fourth, salvation is often an individualistic concept, particularly when it is connected to individual belief. Since it is often seen as an 'escape' from this world, there is a limited concern for others or the ecosystem³⁹. On the other hand, flourishing suggests interconnectedness and there is no flourishing without others. It appears that salvation is a static (once-for-all image), but flourishing is dynamic. Lastly, understandings of salvation are often understood as referring to rescuing of the soul with a limited concern for the body. This indicates a dualism between God (who embodies ultimate value) and the material universe (which has little or no worth). The notion of flourishing on the other hand considers the account of "bodiliness" and includes thriving, diversity, luxuriant growth, obvious and exuberant good health. This "bodiliness" affirms Jantzen's proposition, and the notion that the material world is inseparable from God (Trisk, 2012:262).

3.4. The Flourishing of Women in the Ethiopian context (*Maccasaa Zooxissuwa*)

Patriarchal theology rejects the fact that God and human beings are connected by a loving relationship of mutuality (Isherwood & McEwan, 1993:33). Thus, it needs a critical reassessment to make visible the richness of scriptures, the all-embracing vision of participation by everyone and the all-inclusiveness of teaching. The Feminist theologians argue that patriarchal theology projects God as all-powerful, and as not needing women. Such a kind of God is the projection of the powerlessness and dependence of women. Total obedience is the only way to deal with such kind of God because the interpretation of patriarchal theology makes distinctions between male and female, insider and outsider, 'friend' and 'foe', 'Christian' and 'Non-Christian'. Nevertheless,

³⁸ In this case, there is a room for rescuers who come from outside. Thus, we value savior figures more and reduce the rest of us to the level of helpless creatures that need ruling and rescuing. This is become the ground for ideologies such as racism, patriarchy, and colonialism. Trisk, J. 2012. "Grace Jantzen (1948-2006) – 'They Shall Flourish as a Garden'". in Conradie, E. M. (ed.). *Creation and Salvation (volume 2): A Companion on Recent Theological Movements*. Berlin: LIT Verlag, 262.

³⁹ Jantzen argues that the metaphor of salvation promotes personal salvation, while the rest of the world goes up in flames. Trisk, J. 2012. "Grace Jantzen (1948-2006) – 'They Shall Flourish as a Garden'". in Conradie, E. M. (ed.). *Creation and Salvation (volume 2): A Companion on Recent Theological Movements*. Berlin: LIT Verlag, 262.

the interpretation of feminist theology describes God in a relationship who is experienceable by everybody in her/his life (Isherwood & McEwan, 1993:33, 144-145).

Jones (2000:6) argues that the complex dimension of women's lives that survived and flourished even in the midst of wrenching violence and despair should be studied and celebrated. That is to say, the flourishing of women should be the subject of constructive feminist analysis and the basis for some of its most creative insights. The vision of women flourishing is not usually naively utopian or otherworldly call but, rather, a call to change social systems and reconstruct social institutions. Thus, feminists imagine the future that already left its mark upon the face of history. In short, it is both 'already' and 'not yet' in the present history. Jones calls it, in a theological language: *pragmatic eschatological orientation* (Jones, 2000:10). In fact, articulating the vision of flourishing is challenging since it is always in a state of flux. Jones (2000:75-6) states how flourishing differs from person to person as follows:

Women's flourishing means something different to my Tuesday-night group than it meant to the first women's group that gathered in the Church in 1772. Within the present-day group, the vision also shifts from person to person. For the woman on strike, flourishing means being treated like a professional woman, capable of offering her co-workers creative leadership and solid decision making. For the Caribbean woman, it means being surrounded by generations of her family, all in good health and receiving the education they desire. For the woman who struggles with addiction, it is simply another day without a drink or drugs.

In Wolaita, the proverbial wisdom diminishes *maccasaa zoxissuwa* appropriately to mean the "flourishing of women". Femininity is primarily perceived as a symbol of incapability in Wolaita. Wolaita people often mock the father of a new-born baby girl because it is believed that "femaleness" is valueless for a father. They also devalue the efforts of females in accomplishing successful deeds. The people of Wolaita do not give opportunity for females in decision-making, because it is culturally assuming that females are incapable of making the right decisions. Thus, they do not trust any decision that is made by females. Wolaita women, therefore, are often only observers of a decision in their families and societies and it may, therefore, be argued that this affects their flourishing by promoting the disempowerment of females in Wolaita (Jobo, 2015:64).

However, doctrines (rules, orders, assumptions that direct and structure Christian thought and action) have a significant role in refereeing the gender relations that construct our lives and the many levels of oppression that limit the flourishing of women. Thus, feminist theologians strive to help us to move beyond the traditional views of doctrines (Jones, 2000:17). Feminism is not merely the word of the female or for women, rather it is a word for all who are aware of the true nature of the human community as a mixture of those things, roles, values, and temperaments that we categorize into masculine and feminine. It is the word of all who strive for a community in which all will be empowered to reach the fullness of their being (Oduyoye, 2000:121). Feminist theology is “a theology that articulates the Christian message in language and actions that seek to liberate women and all persons, a goal that Christian feminists believe cannot be disentangled from the central truth of the Christian faith as a whole” (Jones, 2000:14).

3.5. Flourishing at the intersection of Gender, Development, and Theology

As discussed in the previous sections (sections 3.3.1 and 3.3.2), flourishing is considered as a critique of dualistic notions of salvation and as a balanced metaphor or a holistic understanding of salvation. This section, therefore, explores how flourishing as a holistic understanding of salvation interconnects the embodied approach of African Women Theologians at the intersections of gender, development and theology.

Following the establishment of the Circle of Concerned African Women Theologians, these theologians attempted to work on both the poetics and politics of their location. They used their imaginations to understand their hybrid cultures. These theologians contributed to doing poetics of location by emerging the tool of gendered cultural hermeneutics in order to understand God’s living presence in the midst of poverty, neo-colonialism, HIV/AIDS, cultural and religious gender oppression and so on. In the process of cultural analysis, however, the hermeneutics challenges us to look at ‘God’s mission’ (*Missio Dei*) as God’s sending and mending of actions which brings life and love to women and all who are oppressed and marginalised (Russell, 2004:27).

Musimbi Kanyoro, one of the first persons who assisted the founding of the Circle and lead it from 1996 to 2002, argues that “cultural oppression is to African women’s theology what racism is to African American womanist theology” (in Russell, 2004:27). Thus, African women cannot write theology about their lives as postcolonial issues. On the one hand, culture gives women their

integrity, identity, and way of life. On the other hand, culture strengthens its patriarchal forms of domination over women. Unless cultural practices that promote FGM/C and HTPs, myths and ideologies, lack of power in politics, economy and religion are resisted, “the fetters of culture” will not be removed. Similarly, the unity of Christian religion and Western modernity attempts to offer life although it brings oppression, global imperialism, and rejection of the integrity of African cultures (Russell, 2004:27-8).

Therefore, African women theologians such as Oduyoye and Kanyoro attempted to analyse these contradictions through cultural hermeneutics. Oduyoye works very hard by analysing African women reality as ‘culture’s bondswomen’ and she also works with folktales, proverbs, myths, and engages in the wirings of modern African authors (e.g. Buchi Emecheta from Nigeria). Kanyoro (2002:19) says that Oduyoye’s book, *Daughters of Anowa: African Women and Patriarchy*, offers the best example of engendered cultural hermeneutics that is available today. In biblical interpretation, Kanyoro has begun to give focus and use gendered cultural hermeneutics since 1994. Thus, Kanyoro notes that “African women and men read the Bible out of their culture and that, unless we understand how poetics of location affects interpretation, there is no way to open up the scriptures as a life-giving story for those women” (Russell, 2004:28).

Moreover, African women theologians suggest understanding difference as a gift of God because God welcomes all people. It is not our differences that divide us, but our denial to recognize our differences and examine our failure in naming them and its effects on human behaviour (Lorde, 1980:115). Essentialising justifies poverty, oppression, imperialism, and exploitation by affirming that the dominating group is created to ‘rule the world’ (Russell, 2004:37). Therefore, Russell, (2004:37-8) states how the notion of essentialising affects women as follows:

The idea that women were created second, and fell first, reinforces the idea that they are by nature inferior beings dependent on men, and sources of sin and corruption. If every woman needs to belong to a man and to bear children, then a childless African woman loses her identity and a lesbian woman is unnatural or an abomination. As African women, together with their sisters everywhere, recognize that their social reality has been constructed by systems that exploit them, the tools of cultural hermeneutics become invaluable.

As it is mentioned above, African women find their centre in their own experience (not just outside of themselves) and they do theologies with their whole beings. Nevertheless, FGM/C is affecting women and the body that they use for doing theologies. Although FGM/C is mostly performed by women the practice intends to control the sexual desire of women for the benefit of men. Unfortunately, women uphold this practice since it is one of the requirements of marriage, and the society uses it to ensure virginity until marriage. In FGM/C practicing community, marriage is perceived as the only acceptable and significant role for women and women who experienced FGM/C are eligible to marry. As a patriarchal practice, FGM/C reinforces male dominance and that causes harm not only on women who experienced FGM/C, but it has a negative impact on every woman. As a result, this contributes to the gender inequality (Hollely, 2013:203).

However, African feminist theology suggests that cultural practices that causes FGM/C, HIV/AIDS, lack of power (in economy, politics, religion, and sexuality), and other harmful practices that affect the flourishing of women must be resisted. Unless these practices resisted, what Odoyoye calls as “the fetters of culture” will continue to exist in African society (Russell, 2004:28). “In the feminist theologian’s paradigm, the liberation of all peoples would only be achieved in and through the liberation of women” (Kassian, 2005:66). With this awareness, African feminist theology resists the cultural practices that affect the health and well-being of women in Africa. It so does in order to promote the flourishing of all, but not only women. Furthermore, African women theologians have a significant role in the African theological reflections and they challenge the patriarchal theology that diminish the flourishing of women in both the Church and wider society.⁴⁰

The predominance of women’s experience of being persons in Africa depends on primarily in relation to others whether as mother or as wife. Unfortunately, the status of women depends on

⁴⁰ Early feminists were accused male theologians for ignoring the Bible passages that support women’s equality and twisting other passages that serve their own interests. Thus, the doctrine of church leadership that rejected women from ministry was considered as a byproduct of a lop-sided study of the Bible (Kassian, 2005:34). Some Church fathers were wrongly named women. For Aristotle, “woman was not completely developed as a human being; she was a misbegotten or defective male” (Kassian, 2005:33). Thomas Aquinas said, “man is the principle and end of woman, as God is the principle and end of man... Woman exists for the man, not man for the woman” (Kassian, 2005:33). Tertullian referred women as the “devil’s gateway” (Young, 1971:13). Luther also once said, men have broad and large chests and small hips, and more understandings than the women, who have but small and narrow breasts, and broad hips, to the end they would remain at home, sit still, keep house, and bear and bring up children (Kassian, 2005:46).

these relationships, but not on their achievements or qualities. This happens even in the Church. In response to a question that focus on a relationship between women and the Church, an African woman notes that “the women are very much concerned about the Church, but the Church is not much concerned about women” (Oduyoye, 2000:122). Furthermore, Oduyoye criticises our gendered language⁴¹ that we use in relation to God. “If God is spirit, why should we feel alienated by the application of both male and female imagery? – We have to speak anthropomorphically. Are we at home using male terms in relation to God because we see the male as the superior created being, or is there some deeper reason/revelation at work?” (Oduyoye, 2000:129).

Therefore, Oduyoye argues that the language of Christianity should be re-examined as much as it is needed with the languages of other religions. Because the whole community (including family, Church and so on) has limited creativity since they are affected by the culture-bound view of humanity. One of the themes that need a re-examination is the *Imago Dei* [the Image of God] (Oduyoye, 2000:130). Both men and women should re-examine Christian tradition and challenge those aspects that support the domestication of women. (Oduyoye, 2000:133). The theological reflection must consider the feminine experience as a legitimate part of the data (Oduyoye, 2000:135). To balance our one-sided reading of the Bible, the Christian feminists focused on some of the biblical typologies that place men and women equally before God. In the Bible, both men and women are depicted equally as the objects of God’s love. They are free to experience God’s love as much as their personal inclinations. The biblical gifts mentioned in Acts and in other epistles (by Paul) have no gender limitations (Oduyoye, 2000:136).

Moreover, Isherwood and McEwan (1993:105) note that “it is not only stick and stones that hurt us, but words. Words create; patriarchal words about a patriarchal God have created our Western culture. We have seen how this has specifically affected women, but patriarchy affects everyone”. In this regard, it could be argued that, as Kassian (2005:46) puts it, that patriarchy is the result of the two major theological mistakes such as a wrong concept about God and a wrong view of

⁴¹ Language is very important in feminist theology because it illuminates how we are perceived and for many of us this maybe a first step to anger. It also helps us to ‘hear each other’ (Isherwood & McEwan, 1994:106). However, the term sex is different from gender. Sex refers to the physiological differences between men and women, but gender refers to the meaning of culturally constructed systems that identify different things such as persons, gods, ideas, institutions, and the like based on the binary categories of ‘feminine/masculine’ or ‘women/men’ (Jones, 2000:8). According to feminist constructivists, gender is ‘formed’ but not ‘given’ (Jones, 2000:32). Gender does not define our worthiness because it is not present in God. As a result, the gender of God plays a marginal role in the theological writings of African women (Oduyoye, 2001:42).

biblical revelation (Kassian, 2005:46). Kassian (2005:46) further states how the sex of God is perceived and its consequences:

The first misleading and harmful notion about God that Daly [Mary Daly⁴²] cited was the concept of God being male. Although she conceded that few theologians believed that God literally belonged to the male sex – God was Spirit and thus above sexual differentiation – she argued that the idea that God is male still lingered on in the minds of theologians, preachers, and simple believers on a level not entirely explicit or conscious. Furthermore, Daly argued, people took this idea of God as male and unconsciously extrapolated that the male is God – ‘since God is male, the male is God’ – and therefore had bestowed a natural godlike superiority upon the male sex.

One may affirm, therefore, that women’s experience is one of the vital interpretive categories in both feminist theory and feminist theology. In this vein, Hogan (1995:17) finds that when we put “women’s experience at the centre of feminist thoughts we will begin to transform our epistemology by placing questions of what constitutes knowledge, how it is produced and who produces it”. In African feminist theology, women’s experiences serve as analytic tools used by feminists when critiquing patriarchy. But this does not mean the feminist theology is reduced to women’s experience (Hogan, 1995:17-8). Although African feminist theology focusses on women’s experience it strives for the liberation of all human beings, not only women. Similarly, flourishing implies an inner dynamic of growth through responsibility and mutual commitment to one another’s flourishing. The flourishing of women is only possible through the flourishing of all human beings (Jones, 2000:131, Trisk, 2012:262, Oduyoye, 2000:121, Kassian, 2005:66). Therefore, flourishing is a holistic understanding of salvation and it is interconnected with African feminist theology.

The notion of flourishing is also related to the development and gender discourses. For ecofeminist liberation theologians, flourishing refers to an ecological concept that contains everything that gives life for people, earth, and its creatures. They discount the societal conception of flourishing

⁴² Mary Daly’s work has a significant contribution in developing feminist theory within the Church. Her book *The Church and second Sex* drew mainly on Simone de Beauvoir’s book *The Second Sex*. Daly agrees with de Beauvoir’s criticism of the Church, however, she oppose de Beauvoir by saying that the Church was redeemable. Daly attempted to explore the main cause of sexism in religion and suggested some theological solutions for women’s equality in the Church. Kassian, M. 2005. *The Feminist Mistake: The Radical Impact of Feminism on the Church and Culture*. Wheaton, Illinois: Crossway Books, 42.

that attempts to accumulate wealth and pursue pleasure through addiction to alcohol, drugs, sex, and money. Instead, they suggest the need to rediscover the true rhythms of nature and dignity of life. For example, Mary Grey⁴³ (an ecofeminist liberation theologian), visualises flourishing that includes true peace, bodily integrity, celebration, food in plenty – within a situation of restored and renewed relation (Santos, 2017:234). Flourishing relates to gender issues since it promotes the flourishing of all human beings, including women who are often marginalized in patriarchal society.

Besides, flourishing has a biblical concept, so it links with theology. Flourishing is clearly a theme of both Wisdom literature and the biblical prophets (Psalm 92:12, Proverbs 14:4, Zechariah 9:10-17, and Hosea 14:3-7). Although the specific term flourishing is not mentioned in the New Testament the concept is still manifested (Ephesians 3:19–20, 2 Corinthians 9:8, John 10:10, and John 15, the Gospel of John particular) (Santos, 2017:234, Trisk, 2012:261). Therefore, the notion of flourishing links with the intersection of Gender, Health, and Theology.

Finally, the research argues that African feminist theology needs an Africanised flourishing, a flourishing that gives freedom for African women, so they can search God through their own experience. They should use their natural potential and capacity for fruitfulness as it originates from their inner resources and interconnection with one another (Jantzen, 1998: 151). Thus, they may rediscover God, a name to the reality that they encounter but not an intellectual proposition that transcends from their own experience (Green, 2010:5).

3.6. Conclusion

Articulating the vision of flourishing is a challenging task because it is always in a state of flux. Human flourishing is a gift from the God of love but many people in the West feel that they flourish when they experience satisfaction. In this chapter it was indicated that human flourishing has five characteristics namely contextual and concrete, not functional or self-referencing, gift, relational and responsive, and eccentric. Thus, flourishing is different from place to place, and from person to person. The notion of flourishing in the West may, therefore, not be the same as that of Wolaita,

⁴³ Nevertheless, Santos criticizes that Grey's work gives significant insights regarding an interconnected way of living, but it lacks a theology of flourishing (Santos, 2017:234-5).

Southern Ethiopia. Since flourishing is relational and responsive no one will flourish fully until we all flourish together.

It could be further argued that flourishing is a better metaphor than salvation. As some scholars (see for example Kelsey, 2008 and Marias, 2015) argue that flourishing is eccentric (“having your centre outside yourself”). However, the researcher is less convinced on the “eccentric flourishing” because African women find their centre in their own experience (but not just outside of themselves) and they do theologies with their whole beings. The “eccentric flourishing” is not only ‘unAfrican’, but it is also a concept that is divorced from feminism. The transcendent nature of God, that describe the traditional male images of God such as Father, Creator, Lord, and the like, makes God very remote in women’s experience. As the biblical women searched Jesus at the tomb, African women are still searching for the real God through their own experience. However, harmful traditional practice like FGM/C is affecting women and the body that they use to do theologies.

Chapter four discusses Wolaita Kale Heywet Church and its efforts for Gender and Development and, in particular, female genital mutilation/cutting (FGM/C).

Chapter Four

Wolaita Kale Heywet Church and Female Genital Mutilation/Cutting

4.1. Introduction

This chapter explores the Wolaita Kale Heywet Church (WKHC) and its efforts with regard to Gender and Development as well as Female Genital Mutilation/Cutting (FGM/C) in particular. The chapter has three main parts with brief explanations. The first part discusses the broader context of Ethiopia with regard to the marginalisation of women and harmful traditional practices (HTPs). It also looks at the Ethiopian Kale Heywet Church (EKHC) and its engagement in the fight against FGM/C. This is followed by a more in-depth exploration of the context of the region of Wolaita, the Wolaita Kale Heywet Church, Terepeza Development Association (the former Wolaita Kale Heywet Church Development Programmes) and its efforts. Thereafter, as the sections highlights the Women Ministry in the Wolaita Kale Heywet Church. The third and last part discusses the approaches of other churches and faith-based organisations (FBOs)⁴⁴ engagement in the fight against FGM/C in Ethiopia.

4.2. Ethiopian Kale Heywet Church and Female Genital Mutilation/Cutting

4.2.1. The Marginalisation of Women in Ethiopia

In Ethiopia, there are some beneficial traditional practices such as social gatherings, breastfeeding, settling quarrels and the like. The country has HTPs that affect the health and well-being of the society, especially children and women. Some of these HTPs include FGM/C, abduction, early marriage, bloodletting, milk teeth extraction and others that contribute to the transmission of HIV/AIDS and affect the health of women and children (NCTPE⁴⁵, 1998, Baseline Survey on Harmful Traditional Practices in Ethiopia).

⁴⁴ In this context, Faith-Based Organizations (FBOs) includes both local churches and Christian Non-governmental organizations (NGOs). Ifu Training, Research and Consultancy, 2017. *Concerted Efforts of Faith-Based Organizations to Abandon Female Genital Mutilation & Child Marriage in Ethiopia: A Consolidated Report*. Submitted to: Norwegian Church Aid, Addis Ababa, Ethiopia, 6.

⁴⁵ The former National Committee on Harmful Traditional Practices (NCTPE) is now known as YeEthiopia Goji Limadawi Dirgitoch Aswegaj Mahiber (EGLDAM). Its Amharic acronym, EGLDAM, is a national organisation that strives to eradicate HTPs in Ethiopia and operates under the Ministry of Health. In 1997, EGLDAM was legally

Moreover, Temesgen Yohannes (2016:28) notes that women in Ethiopia - as anywhere else - occupy a lower status in society. Although they represent half of the population and contribute mainly to food production and development, they have not shared the fruits of development equally with their male counterparts. Rights such as loans, access to land, and other productive resources are difficult for women to attain. Temesgen (2016:28) adds that women also experience multiple forms of other deprivations such as low levels of education when compared to men, women-specific illnesses, longer working days, and lack of adequate representation in leadership and decision-making positions. In developing countries, the socio-economic development is negatively affected due to the marginalisation of women (Ambachew, Melisew and Tesfaye, 2015:1). Since women are relegated as a social category, their political and economic position is limited in society (Ambachew, Melisew and Tesfaye, 2015:1). This is true in almost all African countries including Ethiopia.

Nevertheless, the Ethiopian government has been working to address the economic and political marginalisation of women and started with the establishment of the Ministry of Women Affairs (MoWA). The Federal Constitution ratified the inclusion of gender issues in 1995. Following this ratification, “gender equality” has become central in all the subsequent policies and strategies such as the National Policy on Women, the Education and Training Policy, the Social Policy and other sector policies (Ambachew, Melisew and Tesfaye, 2015:1). However, there are still some cultural practices that affect the health and well-being of women in Ethiopia. In the rural area, for example, women still work for more than twelve hours per day in the household and farming. Women in the cities also have limited opportunities for work and even when they are employed they are less paid for equal work. FGM/C is widely performed in both Muslim and Christian communities and, as a result, the prevalence of Childhood marriage is very high in rural areas (Tareke, 2009:332-3 as cited in Horn⁴⁶, 2010:23).

registered as an indigenous non-governmental organisation with the Ministry of Internal Affairs. It acquired a certificate of registration from the Ministry of Justice in 1997. See: Norwegian Church Aid. 2009. *Norwegian Church Aid/Ethiopia and Partners' Engagement for the abandonment of HTPs/FGM in Ethiopia: Review of 9 Partners' Contribution (2002-2008)*, 78.

⁴⁶ Nancy E. Horn, a consultant at Tearfund UK, worked with the Ethiopian Kale Heywet Church (EKHC) for more than seven years with support from Tearfund. Horn is a Christian anthropologist who attempted to understand the cultural context of EKHC. Horn, N. E. 2010. *Women in Church Leadership: Culture vs Canon. Paper Presented at the Dialogue on Women in Leadership in the Kale Heywet Church*, Ethiopia, 3.

While there has been progress in the past 15 years, much more work still needs to be done if we are to significantly improve the livelihoods of Ethiopian women that head households with fewer men compared to women proportionally. On top of these, women as caretakers for vulnerable children and orphans are especially subject to the worst effect of famine, drought, and other adverse shocks. Therefore, it is believed that the self-help groups (SHGs)⁴⁷ are attempting to offer space as an intervention approach to reduce poverty and provide women with the mechanism to improve their own lives and engage in the development process of the society (Alaro, 2014:2).

According to EGLDAM, *Ye Ethiopia Goji Limadawi Dirgitoch Aswogaj Mahiber* (The Former National Committee for Traditional Practices in Ethiopia – NCTPE), Ethiopian women suffer from several HTPs that cause severe consequences on physical, psychological and social well-being and violate their human rights. In addition to these challenges, women also attempt to foster a strategy for survival in a setting where the economic dependence on their husband is their only choice in life. (Yayehyirad et al., 2008:78).

In the Southern Nations, Nationalities, and Peoples' Region (SNNPR), women account for more than 50% of the population. Thus, as Ambachew, Melisew and Tesfaye (2015:4) find, women should be at the centre of any development since they are the majority of the society and the most important in development. In SNNPR, women still do not have full access to key economic resources including land as well as other economic and income generating activities. Although the government attempted to empower women and promote their rights to own properties and make decision equally with men, the social courts and community elders have limited efforts to bring change with regards to the reality. The local political leaders and other officials are also not well equipped to implement and interpret laws that were developed by the government. It could be said, therefore, that women are not utilizing the opportunities due to their illiteracy. As a result, they

⁴⁷ Self Help Groups (SHGs) are mutual assistance organizations (groups of 15 to 20 people chosen from the poorest section of the community) through which individuals undertake collective action in order to improve their own lives. Collective action implies that individuals share their time, labour, money, or other assets with the group. SHGs typically involve members in group governance and leadership, and aim primarily to improve individual member welfare. Members of self-help groups receive individual benefits from participation, but groups may also produce positive social externalities (Professor Leigh Anderson, 2014 as cited by Tafese et al., 2016:1). Besides boosting the meagre financial economy of the poor households from bread winning to moneymaking, SHGs have effectively contributed to positive social change for the quality of life for its members. Self-help groups as a tool for social development, if managed and implemented properly, can undoubtedly play significant roles in empowering the poor and in transforming the social status of the marginalized poor (Tafese et al., 2016:9).

lack exposure and information to resist men's dominance, traditional norms, and social bias (Temesgen, 2016:19).

Cultural practices such as FGM/C is increasing due to a misinterpretation of numerous biblical texts that attempt to support the cultural perceptions (Horn, 2010:22). Based on the Gilgal project survey, ten percent of church elders in the EKHC received any theological training, while 45% have never gone to school. As a result, the biblical misinterpretation is perpetuated as the elders largely rely on their cultural experiences and traditions that reject the flourishing of women in every aspect (Horn, 2010:22). The next section explores the EKHC and its engagement in the struggle against FGM/C.

4.2.2. Ethiopian Kale Heywet Church and Female Genital Mutilation/Cutting

Ethiopian Kale Heywet Church (EKHC) is an indigenous evangelical church that was established in the late 1920s but only acquired its legal license to operate as a Church in 1962 (Iftu Training, Research and Consultancy, 2017:31). The first Sudan Interior Mission (SIM) missionaries came to Ethiopia and went for the first time to three destinations such as Wolaita, Sidama, and Hadiya. They planted the missionary stations in those places to share the Gospel. Within a few years the Good News was spread among the southern Ethiopian people⁴⁸ (Dora, 2017:18). When SIM was forced to leave the country by the ruling Dergue in 1974, the EKHC became independent and self-governing and began to work as a partner organisation with SIM. The Church established a national coordinating office in Addis Ababa, the capital city of Ethiopia (Horn and Talore, 2006:4).

Over the years, the EKHC ministry has grown and churches have been planted in all regions, city administrations of Ethiopia, outside of the country and even in different parts of the world⁴⁹. The EKHC is also the largest Protestant denomination in Ethiopia as Horn and Talore (2006:4) and Balisky (2009: xi) indicate. Currently, the Church has more than eight million members, 8,600 local churches, and 126 district church offices (Iftu Training, Research and Consultancy, 2017:31). The EKHC has five administrative levels: (i) the local churches, (ii) the sub-districts, (iii) the

⁴⁸ Ethiopian Kale Heywet Church [Online]. Available from: <http://www.ekhc.net/index.php/about-us-footer> Accessed [2017, 12 March].

⁴⁹ EKHC has planted churches in United States of America, South Africa, Kenya, and South Sudan.

districts, (iv) the zones, and (v) the headquarter. The Church is governed by a board and a general assembly that meet periodically throughout the year (Horn and Talore, 2006:4).

EKHC is largely led by male elders (Horn, 2010:19). Unfortunately, women are often denied the use of their God-given gifts in patriarchal churches. The wrong perception of “submission” (read as subordination) of women to men has developed sin and distorted the glory of God in Church (Horn, 2010:16). Women’s contributions to all ministries at all structural levels of EKHC are not being acknowledged because there are still many misconceptions regarding the role of women in the Church (Horn and Talore, 2006:82).

In 2010, the EKHC presented a strategic plan that brings women to the leadership positions at all structural levels of the Church within ten years. According to this plan, the EKHC promised to offer 25% of higher leadership positions to women (Ethiopian Kale Heywet Church Communications and Literature Department, 2010:3). For this reason, the EKHC Training Department in collaboration with the Women Ministry conducted a three-day workshop⁵⁰ in 2010. At the end of the workshop, the participants came up with 14 points of declaration that promote the role of women in the Church. They agreed that women who have the gift of leadership should serve in all levels of the EKHC’s structure; that is, from the local church to the Head Office (Ethiopian Kale Heywet Church Communications and Literature Department, 2010:4). Like many other evangelical churches, EKHC experienced both the persecution and the growth from 1974 to 1991 during the Marxist regime, and it is also influenced by the underground Pentecostal movement. EKHC is well-known in the area of social concern with its integrated mission and the Church has different social development departments (Bekele, 2011:221).

The Ethiopian Kale Heywet Church Development Commission (EKHCDC) is established as a development arm of the Church to promote integrated (that is, holistic) transformational development by fulfilling spiritual, economic, social, physical, and mental need of the people, so they can be healthy, productive, and glorify God (Iftu Training, Research and Consultancy, 2017:31). The EKHCDC (the former Ethiopian Kale Heywet Development Programs) is an

⁵⁰ The workshop was entitled with “Gender relations and Church Leadership” and sixty-six ministers who are serving in higher leadership positions of the Church are participated in the workshop. Ethiopian Kale Heywet Church Communications and Literature Department, 2010. *Excellence in Holistic Transformation: Kale Heywet Magazine: No. 35*, Addis Ababa, Ethiopia, 3.

indigenous registered and licensed charity that undertakes several activities in different parts of the country focusing on children, youth, women, people affected by HIV/AIDS and communities as a whole. EKHCCDC has been engaging in many development project interventions, such as WASH (Water Sanitation and Health), urban and rural integrated development, child and family development, orphanage, health and HIV prevention and/or management, education and literacy, and FGM/C (Iftu Training, Research and Consultancy, 2017:31). The EKHCCDC has a long history in the country with regard to relief, rehabilitation and different development activities including health, water, agriculture, resource conservation, education, women development and the like (Ethiopian Kale Heywet Development Program, 2004:3).

FGM/C is one of these practices and it is practised in almost all regions of Ethiopia. It is also recognized as one of the most common HTPs in Ethiopia, particularly in SNNPR. It cannot be overemphasised that, since its establishment in 1927, EKHC has been working hard to ensure many HTPs are eradicated in Ethiopia. In reality, the EKHC⁵¹ has particularly played a significant role in eradicating HTPs in SNNPR (Ethiopian Kale Heywet Church Development Program, 2011:5). In the same vein, the EKHCCDC published a training manual called *Awareness Building Against Female Genital Mutilation* in 2011.⁵² The training manual attempts to show that the EKHC has a good experience in the struggle against FGM/C.

Understanding FGM/C as serious health and physiological complications on females, the EKHC considers circumcision as violation of human rights (Ethiopian Kale Heywet Church, 2004:3). EKHC started combating FGM/C since 1950s, through the systematic and project-based activities launched in April 2000. Since then, the FGM/C project had been operational for more than 15 years in different localities of Oromia and SNNPR (Ethiopian Kale Heywet Church Development

⁵¹ Based on the 2007 Population and Housing Census of Ethiopia, more than 55% of the population of SNNPR are Protestants and most of them are the members of EKHC. According to the 2007 Population and Housing Census of Ethiopia, the population of SNNPR comprises different religions such as 8,282,625 Protestant, 2,964,321 Orthodox, 357,507 Catholic, 2,108,103 Islam, 990,713 traditional, 226,279 others. Federal Democratic Republic of Ethiopia Population Census Commission Central Statistical Agency. 2010. *The 2007 Population and Housing Census of Ethiopia: Results for Southern Nations, Nationalities and Peoples' Region*. Addis Ababa, Ethiopia, 197.

⁵² The manual has 80 pages and 11 chapters. It includes EKHC's long-time experience on the issue, the Church's systematic and project-based activities launched since 2000, and many professionals and expert's participation and efforts in ending FGM/C. Ethiopian Kale Heywet Church Development Program, 2011: *Awareness Building Against Female Genital Mutilation*. Ethiopian Kale Heywet Church FGM Prevention and Abandonment Office. Addis Ababa, Ethiopia, iii.

Program Commission, 2016:5). The first FGM/C project targeted five districts only in Sidama, Hadiya, Kembata Temabaro, Dawro and Keffa zones of the Southern Regional State (Ethiopian Kale Heywet Church, 2011:1).

Nevertheless, the FGM/C project started in 2000 has been implemented in ten districts, nine in SNNPR and one in Oromia. The zones that benefited from the project include Sidama, Hadiya, Kembata Temabaro, Wolaita zones⁵³ and Alaba Special Woreda in the SNNPR. The tenth one is in the West Arsi zone of Oromia Region. The other consolidation project started in February 2010 and targeted all the ten districts targeted by the FGM/C II project. This project was also completed on January 31, 2012. The main aim of the project was to mainstream the outcomes of the previous phases into the beliefs and practices of the target communities (Ethiopian Kale Heywet Church, 2011:1).

According to the external evaluation of the consolidation project made in 2012, it is believed that the prevalence of FGM/C has been reduced by more than 80% in targeted districts due to the collective efforts made by EKHC, government, and other concerned groups (Ethiopian Kale Heywet Church Development Program Commission, 2016:5). Nevertheless, the problem is still apparent in non-targeted areas where there have not been any additional interventions besides the efforts of government (Ethiopian Kale Heywet Church Development Program Commission, 2016:5). Although EKHC attempted to address FGM/C in Wolaita, with very limited efforts that focus just on a single Woreda (Damot Gale), FGM/C is also continued to be the worst HTP that affects the health and well-being of girls and women in Wolaita according to the Women and Children's Affairs Office of Wolaita Zone (2016:17).

Despite the EKHC's teaching about the consequences of FGM/C, the members of EKHC practice it secretly and publicly because FGM/C is perpetuated by culture and tradition of many ethnic groups. The EKHC members are still not able to recognize the consequences of FGM/C and they undermined the decision that the former members agreed not to perform the practice. Nevertheless, EKHCDC published the training and counselling manual to improve its ongoing efforts in the struggle against FGM/C (Ethiopian Kale Heywet Church Development Program, 2011: ii-iii).

⁵³ Sometimes EKHC has projects that work in different areas without making a link with its district offices in that specific area. For example, EKHC has a project that works on FGM/C in Wolaita, however, the project has no link with the WKHC, a district office of EKHC.

One of the challenges in fighting against FGM/C is the practitioners' use of the practice as a source of income. When the practitioners get other means of income, FGM/C need no longer be a source of income and the change can be sustained. With this awareness, FBOs have attempted to find other means of income for the practitioners. For example, the EKHDCDC has managed to design and implement alternative income generating activities for FGM/C practitioners. The Income Generating Activities groups include traditional circumcisers and community-based change agents who are trained on prevention and elimination of FGM/C. The traditional circumcisers then stop performing their traditional service of FGM/C as a means of livelihood and are organized into income generating programs. The project has no salary for the change agents or volunteers. Nevertheless, it offers loans for them to make their own business choices (Iftu Training, Research and Consultancy, 2017:45).

In addition, the EKHDCDC played a significant role in the struggle against FGM/C by using the practitioners of FGM/C as change agents. Through its grassroots projects the EKHDCDC identifies the practitioners of FGM/C in different villages and helps them to understand the consequences of FGM/C on the lives of girls and women. After creating awareness, the project managed to design and implement alternative income generating activities for the practitioners. Following the change in the practitioners' behaviour, they join campaign against FGM/C in their villages and communities. (Iftu Training, Research and Consultancy, 2017:51).

In this regard, one can find that the EKHDCDC has many success stories in strengthening collective responses through girls' clubs. One of the success stories is raising awareness against FGM/C that focuses on the consequences of the practice in the target district. About ten thousand girls are organized into anti-FGM/C clubs that helps them resist the stigma because of their decision not to cut. In the target district, there are hundreds of anti-FGM/C clubs formed and each club contains hundreds of members. The project empowers girls by giving enough information on the causes and consequences of FGM/C, non-biblical (religious) basis of the practices and the illegality of the practice. For that reason, girls become resilient to FGM/C and through their anti-FGM/C clubs they are able to say 'no' to the practice (Iftu Training, Research and Consultancy, 2017:51).

It can, therefore, be deduced that EKHDCDC has been engaged in the struggle against the practice of FGM/C in Ethiopia as seen by its work in 20 Woredas focusing on FGM/C both in Oromiya

and the southern regions. The zones included Hadiya (west and east Badewacho districts); Sidama (Shebedino, Dale, Aleta Wondo); Kembeta Tembaro (Angecha, Kadida Gamela, Denboya, and Kacha Birra); Halaba Special Woreda; and Wolaita Zone (Damot Gale). In Oromia, the Shalla Woreda in west Arsi zone was also included. The major funding for anti-harmful traditional practices interventions, with a focus on FGM/C, came from the government of Germany through KNH [Kindernothilfe], a German-based charity. Nevertheless, currently the EKHDCDC operates in only one district due to a funding shortage (Ifu Training, Research and Consultancy, 2017:31).

4.3. Wolaita Kale Heywet Church (WKHC)

4.3.1. Dealing with Social Challenges in Wolaita

Wolaita zone is one of the most densely populated zones in Ethiopia, which leads to migration. Youths and adults are migrating in significant numbers to many different parts of the country but usually return home to visit their family during the holidays. This phenomenon makes the community in general, and particularly the most productive age groups, vulnerable to HIV/AIDS and other sexually transmitted diseases (STDs). Therefore, there are a significant number of people living with HIV/AIDS in Wolaita and, as KMG (2014:2) finds, the majority of them are female. According to *Kembatti Mentti Gezzima* (KMG), Kembatta Women Standing Together, women and girls are victims of FGM/C and rape in Wolaita. In view of the fact that they are economically dependent, they lack confidence to demand for their rights and resist a violence that is perpetuated by society (mainly by their husbands and/or fathers). Wolaita women and girls are victims of rape and abduction to and from places such as schools, markets and when they go to collect wood or fetching water. Women, therefore, become double victims of various violence seeing that there is no safe house for survivors of violence to obtain medical, psychological, and legal counselling (KMG, 2014:2). The imposed femininity and the oppression of women in Wolaita is expressed as follows:

The society [Wolaita] blurs the distinction between sex and gender with regard to the production of pottery, and thus manipulates the position of the potter community and the nature of its subsistence work. At the base of this blurring of gender and sex is the process of emphasizing femininity. This process includes, of course, the widespread practice of so-called ‘female circumcision’ manipulates female sexuality, thus allowing for stereotyping them into a femininity preferred by men. According to Wolaita informants, female

infanticide was practiced because it was considered shameful for a man to have only daughters or many of them and was thus obviously meant to control women's rate of survival. Even nowadays, the birth of girls is not a cause for celebration (Berhane-Selassie, 1991:15).

The Women and Children's Affairs Office of the Wolaita Zone (2016:3) has done research⁵⁴ to understand at what level Wolaita women's social, political and economic participation is affected by HTPs and particularly FGM/C. They identified a number of the current HTPs in Wolaita. According to the study, FGM/C, excluding women from inheriting their parent's wealth, and sexual violence are practised widely. Rape, polygamy and early marriage is decreasing but the illegal use of children labour in urban areas is increasing. There also appears to be a revival of some HTPs, such as unnecessary funeral services, dowry, and others. Many people do not have enough money to get their basic needs such as food, clothing, shelter, security, and medical care in Wolaita. However, they are more concerned about and even spend money for funeral services, dowry, and other HTPs (Women and Children's Affairs Office 2016:3).

In Wolaita, FGM/C is widely accepted and practised in all woredas⁵⁵ and it causes a great damage to the health and well-being of women and girls. FGM/C is very painful and dangerous practice because the procedure has no anaesthetic or antibiotics. Therefore, the girls are not able to go to school in Wolaita. Girls who have never experienced FGM/C experience stigma from their friends so that they want the practice to avoid their friend's insults. Despite the fact that FGM/C is a harmful practice, the families and communities assume that FGM/C is their culture and tradition.⁵⁶ It explains why this study focuses mainly on the role of the Church in ending FGM/C so as to improve the flourishing of women with a focus on the Wolaita Kale Heywet Church, Southern Ethiopia.

⁵⁴ The data collection tools of the study are a questionnaire, interview, panel discussion, and document analysis. This research used both quantitative and qualitative methods to analyse the data that are gathered from eight Woredas, ten schools and ten Kebele leaders. The study includes participants from different groups such as girls, parents, community people, community leaders, Kebele and Woreda leaders, and professionals. Women and Children's Affairs Office of the Wolaita Zone, 2016. *Research on Female Genital Mutilation and Harmful Traditional Practices in Wolaita Zone*, Wolaita Sodo, Ethiopia, 16-17.

⁵⁵ Woreda is an administration level in Ethiopia above Kebele and below Zone.

⁵⁶ United Nations Children's Fund. 2003. Female Genital Cutting: Painful procedures in the name of tradition [Online]. Available from: https://www.unicef.org/infobycountry/ethiopia_18246.html Accessed [2017, 4 April].

4.3.2. Wolaita Kale Heywet Church

In 1928, the SIM missionaries left Addis Ababa, the capital city of Ethiopia, with an intention to reach Jimma, which is two hundred miles to the southwest. The missionaries were traveling by following the narrow trails since there were no roads. They were reliant on an Ethiopian guide who claimed to be familiar with the direction. However, they were lost within few days according to Davis (1984:4). Since there was no choice, the missionaries continued and finally arrived at Wolaita Sodo, a town which is 6 days' journey far from their intended destination (Jimma). The Wolaita governor welcomed the missionaries warmly and invited them to stay at a beautiful place, a hilltop site supplied with water. The governor offered the suitable place to them as a mission station (Davis, 1984:4).

The missionaries became more interested in the Wolaita language. The Wolaita people appreciated the missionaries' efforts in this regard. The new converts were excited to preach the Good News and they began to grow. Since the term 'Christian' is similar with the Ethiopian Orthodox Tewahedo Church (the state religion at the time), the new converts chose to be called 'believer'. In 1933, the first water baptisms of ten believers (two women and eight men) took place in Wolaita Sodo and then church planting started in the surrounding areas (Davis, 1984:4). The Wolaita evangelists began to take the responsibilities of spreading the gospel to different areas since the foreign missionaries left the country during the Italian occupation (Wotango, 2009:22 as cited in Dora, 2017:19).

Many scholars (see for example: Raymond Davis, 1984, Donald Crummey, 1967, Peter Cotterell, 1973, and Brian Fargher, 1989) attempted to study why the Wolaita people responded to evangelical Christianity. The scholars give different reasons for the Wolaita people's conversion into Christianity. For Raymond Davis, the conversion is only attributed to the work of the Holy Spirit, but Donald Crummey considers the political, historical, religious, and socioeconomic situation of the Southern part of Ethiopia. Moreover, Brian Fargher's PhD dissertation, *Origins of New Churches Movement of Southern Ethiopia: 1927-1944*, focused on the foreign missionaries who acted as a catalyst or as a choir leader. But it is also not able to identify the reasons why the Wolaita people accepted the new religion and why they were motivated to share it with others (Balisky, 2009: xv-xvi).

For Balsiky (2009), the conversion of Wolaita seems “mysterious”, however, Dena Freeman (2013:231-249) highlights it in a better way. In 1894, the kingdom of Wolaita was incorporated into the Ethiopian empire after the bloodiest campaigns and conquest by the emperor Menelik II. Until the conquest, the kingdom of Wolaita was one of the powerful kingdoms in the country. Since the Wolaita people were humiliated and demoralized by the conquest, they lost interest to accept the religion of their conquerors such as the Ethiopian Orthodox Tewahedo Church. There was a religious vacuum due to the spiritual void during the conquest. Therefore, when SIM missionaries came to Wolaita the people of Wolaita were very interested in the new religion (Protestant) and its discussion of suffering and salvation because it relates to their reality (Freeman, 2013:233).

The SIM’s fundamental missionary policy promotes the importance of evangelism (the preaching of the Word to ‘save souls’) through its auxiliary, social concern. Though, the Ethiopian Orthodox Tewahedo Church’s compartmentalized a narrow view of mission even to the present time merely accuses the missionary works of charity as ‘stealing’ its members and manipulating them to convert to a new religion. However, the mission’s work was very interesting to the rural people in southern Ethiopia. This resulted in the message of the gospel beginning to spread in their communities. Following their conversion, new believers were sent back to their communities as local missionaries and this evangelistic strategy proved to be very effective as Bekele (2011:213) indicates.

In this regard, there are three fundamental SIM convictions (“the three legs of a stool”) that undergirded the SIM ministers in their missionary activities in Wolaita. These are convictions, radical behavioural change, and the formation of Christian communities called *amanyoch* (Balisky, 2009:111). Therefore, the Wolaita people accepted and incorporated the SIM’s three fundamental convictions into their own belief system and they began to use it (Balisky, 2009:111). The astonishing growth of Christianity throughout Southern Ethiopia would be inconceivable without the dedicated evangelists of the Wolaita Kale Heywet Church (Balisky, 2009: xi).

As it were, Wolaita was able to discover its own identity through religion. The Wolaita people were very impressed by the new religion and their evangelists were dedicated to initiate and sustain change through the promotion of the religion. Through the instrumentality of the Wolaita evangelists Wolaita served as a means to bring the reality of a new religious identity to other

nations in Southern Ethiopia. Finally, the Christian movement of the Wolaita evangelists became structured into the EKHC (Balisky, 2009:316). The current data indicates that the Wolaita Kale Heywet Church (WKHC) has about 1.3 million members and 1,312 local churches. The WKHC sent more than 190 cross-cultural missionaries all over Ethiopia and 5 missionary families abroad (Somalia, Kenya, China, Cambodia, and Chad) (Wolaita Kale Heywet Church, 2017:2). Therefore, the obedience of Wolaita people to God's mission (*Missio Dei*) created yet another Jerusalem from which God's mission emanates (Balisky, 2009:325).

4.3.3. Terepeza Development Association

Terepeza Development Association, formerly known as WKHC Development Programs, has been addressing the needs of Wolaita people since the late 1902s (the establishment of the Church). The WKHC is known for its provision of holistic ministry in Wolaita and the surrounding areas. The Church introduced education, health, hygiene and sanitation, WASH [Water Sanitation and Health], modern agriculture, and others to the people of Wolaita. Therefore, the WKHC played a significant role in the transformation of Wolaita itself (Wolaita Kale Heywet Church, 2013:30). In 2001, the WKHC development programmes were officially registered by the Ethiopian government in order to provide services for the community according to the government's rules and regulations regarding nongovernmental organizations (NGO). The development programme was also re-named "Terepeza Development Association" in order to acknowledge the WKHC forefather's holistic ministry (Wolaita Kale Heywet Church, 2013:33).

According to the Terepeza Development Association (TDA) project profile, the current TDA ongoing projects are seven in total. The first project is Humbo and Damot Woyde climate change resilience livelihood development project and its focus area are conservation agriculture, SHGs, natural resource management through FFW (Food for Workers), inputs for food security enhancements, and capacity building. The second project is Sodo CCDP [Children Care Development Project] (sponsorship project) and its focus area is education, WASH, SLD (Sustainable Livelihoods Development) health, and strengthening CBOs (Community Based Organizations). The third project is an integrated SHG promotion project and its focus area is empowering women through: business skills development, training in savings and credit, linkages with MFIs (Microfinance Institutions) and banks, and other capacity building support (Terepeza Development Association, 2017:1)

The fourth project is the infant and young children nutrition project and its focus area is children from age 0-23, training for care givers on the use of MNP (Micro Nutrition Powder) package, optimal breast feeding, strengthening health facilities, and training HEWS (Health Extension Workers). The fifth project is Offa-Kindo food security and sustainability livelihood project and its focus area are conservation agriculture, sustainable organic agriculture, SHGs, CBOs empowerment, watershed development, and DRM (Disaster Risk Management). The sixth project is organizational capacity building for humanitarian response and its focus area is building internal capacity, policy lobby and advocacy, and networking with key government actors. The last project is an emergency response project and its focus area is emergency food and WASH (Terepeza Development Association, 2017:1). The following table discusses the current ongoing projects of the Terepeza Development Association.

Table 4.1: Terepeza Development Association ongoing Projects⁵⁷

S/N	Ongoing Projects	Beneficiaries	Budget	Duration	Funding Agency
1	Humbo and Damot Woyde Climate Change Resilience Livelihood Development Project	49,500	26,460,000	April 2015- March 2020	Global Affairs Canada thru WRC-CFGB ⁵⁸
2	Sodo CCDP (Sponsorship Project)	59,690	13,763,962	April 2015 – March 2018 ongoing	CCFC ⁵⁹
3	Integrated SHG promotion Project	45,780	2,415,000	January 2014- December 2018(ongoing)	Irish Aid

⁵⁷ Terepeza Development Association. 2017. *Terepeza Development Association ongoing Projects*. Terepeza Development Association, Wolaita Sodo, Ethiopia, 1.

⁵⁸ World Relief Canada – Canadian Food Green Bank

⁵⁹ Christian Children Fund of Canada

4	Infant and Young Children Nutrition project	307,337	14,690,852	January 2017 –June 2021	Micro Nutrient Initiative Canada
5	Offa-Kindo Food Security & Sustainable Livelihood Project	111,765	14,166,537	April 2014- March 2017	Buza & ICCO ⁶⁰ through Tearfund UK & Tear Netherlands
6	Organizational Capacity building for humanitarian response	-	1,000,000		Start-fund
7	Emergency Response Project	25,000	20,547,817	May-Sep 2017	Tearfund ⁶¹

The TDA has been undertaking a SHG program taking food security as project efforts in Offa and Kindo Koyisha districts from 2011 to 2014. This programme was aimed at contributing towards food security and livelihood improvement of food insecure poor households in Offa and Kindo Koysha districts by the end of June 2014. At the end of the project period, the TDA has established 163 SHGs with 2,388 members in the project area (Tafese and other, 2016:1).

According to the TDA, the SHG approach is constructed on two basic canons. First, every single individual is gifted with marvellous potentials; therefore, it is possible to empower the poor, so they can realize their hidden capacities and use them. In this regard, one can use their potential even in the presence of a society that relegates people and make them believe that they are poor and valueless. Second, even if the poor are powerless, discriminated and voiceless, they can be strong engines of growth when they bring their resources together (Tafese et al., 2016:3).

⁶⁰ Interchurch for Development Cooperation

⁶¹ Tearfund is an international Christian non-governmental organization (NGO) with a focus on relief and development. It is established in the mid-1960s during the Nigeria Biafra famine and conflict. In Ethiopia, Tearfund works through local church partners. Since 2002 Tearfund/Ethiopia focuses on community empowerment and development through a self-help approach. Meehan, F. and Mengistu, E. 2016. *Drought, Resilience, and Self Help in Ethiopia: A review of Tearfund Self Help Groups following El Niño*. USAID/Ethiopia Agriculture, Knowledge, Learning, Documentation and Policy (AKLDP) project and Tearfund Ethiopia, Addis Ababa, Ethiopia, 8.

The TDA SHG/food security program has been working since 2007. In its third project phase (that started in 2013), it attempts to focus empowering vulnerable communities by creating and sustaining resilience through SHGs. Currently, the programme is scaling up the SHG approach in order to enable poor households by mobilizing available resources, reducing vulnerability, and developing long-term mutually supportive relations. The SHGs attempt to reach an appropriate level of maturity for them in order to create a sustainable community institution (Meehan and Mengistu, 2016:14). The following describes the SHG/food security program of the Terepeza Development Association from 2013-2015.

Table 4.2: Terepeza Development Association (TDA) Self Help Group/Food Security Program⁶²

TDA Program	2013	2014	2015
Total number of SHGs	366	400	510
Number of female members	5,162 (80%)	5,260 (78%)	7,003 (82%)
Number of male members	1,305	1,475	1,538
Total savings (Eth birr)	869,303 (US\$39,514)	1,084,295 (US\$49,286)	1,654,128 (US\$75,188)
Total loans (Eth birr)	626,324 (US\$28,469)	872,343 (US\$39,652)	1,592,684 (US\$72,395)
Number of loans	12	16	25
Minimum weekly saving (Eth birr)	1.50 (US\$0.07)	2 (US\$0.10)	3 (US\$0.14)
Maximum weekly saving (Eth birr)	5 (US\$0.23)	7 (US\$0.32)	10 (US\$0.45)
Maximum loan (Eth birr)	4,000 (US\$182)	5,550 (US\$252)	10,000 (US\$455)

⁶² Meehan, F. and Mengistu, E. 2016. *Drought, Resilience, and Self Help in Ethiopia: A review of Tearfund Self Help Groups following El Niño*. USAID/Ethiopia Agriculture, Knowledge, Learning, Documentation and Policy (AKLDP) project and Tearfund Ethiopia, Addis Ababa, Ethiopia, 15.

In addition, the SHG approach highlights the role of women in development. The fact that discriminatory norms can aggravate the vulnerability of women to stresses and shocks and they are excessively affected by disasters and climate change. Women experience a high risk of mortality and GBV during and after a disaster, therefore, their health and well-being are severely affected (Concern Worldwide, 2015 as cited by Weingärtner, Pichon, & Simonet, 2017:14). However, the vulnerability of women does not stop them from playing a major role in improving the resilience of their family and communities, and climate change and disasters. Often women are perceived to be victims but not as equal contributors of skills and knowledge. Nevertheless, great transformation is achieved when women participate as change agents, not just as recipients of support (Sogani, 2016 as cited in Weingärtner, Pichon, and Simonet, 2017:14).

Women who are participating in the SHG in Wolaita have seen changes in their human and social assets (children's education and family's health), economic assets like livestock, and now have leadership positions and voice in the community. Nevertheless, their subordination to men is remained strong in both private and public place, and the SHG alone cannot solve this historical power imbalance (Weingärtner, Pichon, and Simonet, 2017:26).

Most of the time, at the initial stage, men questioned and discouraged women's decision to participate in SHGs. Thus, many women attempted to hide their involvement in the saving by fearing their husband's attitudes toward the SHG. Men were less convinced in the concept of saving in groups and its benefits in improving lives. This misunderstanding was common in the wider society since it was backed by jealousy of men. However, the men who oppose women's participation in SHGs became the owner of the money (Weingärtner, Pichon, and Simonet, 2017:26). This is how men manipulate women's income from the SHGs in Wolaita, which is an indication of a patriarchal society:

Remarkably, men admitted to asking their wife for loans through her SHG. Though these loans were intended for agricultural inputs to benefit the household and it is unclear whether women offer this voluntarily or their husband puts them under pressure to do so, going through his wife to access money was a new phenomenon in the study location. It marks a distinct change from women who were not in SHGs, who still needed to ask their husband for money and who had little recourse to challenge his financial decisions. In one FGD [Focus Group Discussion] with non-SHG members, women in polygamous marriages

described how their husband tried to steal land and livestock from them to redistribute their assets to other wives. The women lamented their lack of power, saying, ‘We can’t react. We may complain, but our complaints are for nothing. Every woman in every household in the village feels the same pain’ (Weingärtner, Pichon, and Simonet, 2017:27).

Therefore, Terepeza Development Association (TDA) has many projects that attempt to address the needs of Wolaita people. According to the Women and Children’s Affairs Office of Wolaita Zone (2016:17), FGM/C is the worst HTP that affects the health and well-being of girls and women in Wolaita. However, TDA has no project that focuses on ending FGM/C. As a result, the Church’s efforts are limited in addressing the wider community needs. Currently, Wolaita women are at a high risk of FGM/C because of the limited involvement of faith-based organizations, social norms, the position of women and girls in the community. Therefore, it appears that the Wolaita Kale Heywet Church is not playing well her role in ending FGM/C to promote the flourishing of Wolaita women.

4.3.4. WKHC Women Ministry

In fact, any development that aims to bring change in the lives of the entire population must create opportunities for women to be equal beneficiaries. Since women are the backbone of the households, empowering women is needed to ensure sustainable development. Unless women are educated and build their capacity in economy and politics, it is impossible to have a real development (Ambachew, Melisew and Tesfaye, 2015:4). However, men are valued more than women in Wolaita. Men are viewed as the only potential decision-makers and protectors of their families and their churches. This gives men the right to be leaders over women and makes women to have less power, particularly in the matters that are related to leadership (Tantu, 2009:12). It should be indicated that, here, the thesis explores women’s ministry within the context of WKHC, and how involved WKHC is in addressing FGM/C. Indeed, FGM/C is a development concern, but which remains unaddressed within the development arm of WKHC.

As it were, there still is gender inequality in Wolaita to the extent that women are often oppressed by men. In the past, Wolaita men assumed women as less human (as cows) who are unable to learn (Balisky, 2009:114). The dignity of women was treated with little respect or honour. Women were not allowed to speak or discuss on issues of family interest. Because their husbands were jealous

they were only encouraged to dress in a way that would conceal their natural beauty, so they can have a less than beautiful appearance. The birth of a baby girl was therefore considered as the cause a great sorrow in the family (Balisky, 2009:152).

Despite the discouraging attitude towards women in Wolaita, the SIM women missionaries continued to teach some Wolaita women at Otona.⁶³ In 1945, Laurie and Lily Davison (former SIM missionaries) returned to Wolaita and they discovered that women in the rural areas had then taught their children. The children also taught others. As a result, the Wolaita *amanyoch* (believers) were the change agents in this regard (Balisky, 2009:114). The first two women, Mamite and Fakare, were the first believers in Wolaita who were baptized with the eight men for the first time at Sodo in 1933 (Davis, 1984:4, Tantu, 2009:3). These two women were preachers and teachers of the Word of God with their husbands in Wolaita and the surrounding areas.

Moreover, Mamite and Fakare were the founders of the women ministry with the first eight believers in the WKHC. Selma Bergsten also served Wolaita women with these two women (Tantu, 2009:3). Selma Bergsten began to discuss with the Wolaita *mahibar*⁶⁴ elders to provide special training for Wolaita young women in 1946. Twenty-one young women were selected from different *salot betoch*⁶⁵ for the two-month learning programme in 1947. Balote Aymalo was one of the twenty-one young women who completed the two-month training. When they returned to their local districts they began to teach what they had learned (Balisky, 2009:195). Balote Aymalo⁶⁶, an evangelist woman, and other trainees contributed to the establishment of the Wolaita women's mahibar. They assisted by teaching, collecting funds for the evangelists, and facilitating

⁶³ Otona is a hilltop area located in Wolaita Sodo and the former SIM missionaries opened a mission station there to spread the gospel. Now the Wolaita Kale Heywet Church main office is situated at Otona.

⁶⁴ Mahibar is Amharic word for "association".

⁶⁵ *Salot betoch* refers to prayer houses.

⁶⁶ Balote was born in Koyssha worada (district) in 1917. She was converted in 1944 through her father's (Aymalo) songs while he was performing chores around his farmstead. While she was in Gofa her husband, Amoche, was killed by badits in Sidama. "When a messenger from her home church in Koyssha brought Balote the news of Amoche's death, she now had to make a choice whether to remain in Gofa or to return to Wolaita. Her decision was, 'I have been called of God not by man. I am going to stay'. Balote and her son remained in Gofa for seven years, teaching children and women literacy, handcrafts, and Bible texts in designated *salot bet* for up to two months in each. She had no home of her own but was dependent on the hospitality of the wives of the other evangelists and Gofa *amanyoch* [believers] as she itinerated throughout Zalla district. Balote's faithful years of service in Gofa have been recognized by the Wolaita mahibar. Many in Gofa continue to rise up and call her blessed". Balisky, E. P. 2009. *Wolaita Evangelists: A Study of Religious Innovation in Southern Ethiopia, 1937-1975*. Pickwick Publications: Eugene, Oregon, 195.

the fellowship. Many women participated in evangelism outside of Wolaita. In 1962, for example, Balote returned from Gofa to Wolaita and the Terepeza (Wolaita Kale Heywet Church) elders assigned her to coordinate the women's ministry in the Wolaita mahibar (Balisky, 2009:195-6).

Selma Bergsten played a significant role for the establishment of the WKHC women ministry. Selman Bergsten and Beatrice Bernard taught in Wolaita Sodo town for fourteen months starting from August 1945 and then Bergsten began to travel among eight district centers of WKHC for the teaching program (Balisky, 2009:162). The course included literacy, Bible study and memorizing versus, and other skills such as food preparation, knitting, household management, growing of vegetables, embroidery, and earning funds for support of evangelists (Balisky, 2009:162). This informal training nurtured and equipped many young women and most of them became the wives of the pioneer Wolaita evangelists. These able wives' skills, commitment, and spiritual resourcefulness were the backbone for the successful evangelistic outreach of the WKHC (Balisky, 2009:162).

However, the positive beginnings of the women's ministry in WKHC and other EKHC churches was not able to receive attention and support as the Church grew. The women's ministry, therefore, waned throughout all the local churches and, as a result, the EKHC Head Office began to conduct a study in 1987 to identify and address the gap in the ministry. In 1990, the EKHC established the Women Ministry at head office level in order to fill the gap in the ministry and support women with regards to spiritual, social, and economic aspects. The EKHC Women Ministry began to coordinate the women's ministry in all zonal and districts offices including the WKHC Women Ministry (Kebebush, 2006:2). The EKHC Women Ministry is serving the zonal and districts offices by facilitating different kinds of training and conference on several topics. Even though most of the members of EKHC are women, the women's ministry in EKHC is still receiving less attention from the Church. Therefore, the women's ministry is not able to effectively address the needs of women in the Church (Kebebush, 2006:2).

Despite the challenges of the women's ministry in the EKHC (in general) the WKHC Women Ministry coordinates the women ministry at all the district, sub-district, and local church levels in Wolaita. This includes facilitating different kinds of trainings (both spiritual and short-term professional skills trainings), coordinating the women ministry leaders of the district offices,

collecting annual contributions from the local churches, earning funds from cafeteria at WKHC's compound in Otona, attending meetings at national level, and the like (Wolaita Kale Heywet Church, 2016:1-5).

Furthermore, the WKHC Women Ministry attempts to renew the vision of Selma Bergsten. In 2015, the WKHC Women Ministry opened the 'Women Ministers Holistic Training Center' to train, equip, and empower women holistically. The center offers a Diploma in Holistic Ministry after completing two years of studies. The courses of the programme include Amharic Bible courses (60%), as well as general and professional skill related courses (40%). The school is located at the WKHC's compound in Otona, Sodo. The training center has its own library, classrooms, office, dormitory, dining room, other offices for the practical skill trainings (Wolaita Kale Heywet Church Women Ministry, 2015:3-12).

Moreover, the WKHC Women Ministers Holistic Training Centre offers some courses that promote the flourishing of women. Topics such as 'Women in the Bible', the significance of women ministry, harmful traditional practices and a biblical response, etc. are some of the courses that the students take in this two-year holistic training programme. The course 'harmful traditional practices and a biblical response' mainly focuses on FGM/C but provides a biblical response to it. The training centre uses Sandy Willcox's book, *Cut Flowers: Female Genital Mutilation and a Biblical Response*,⁶⁷ as text book (WKHC Women Ministry, 2015:3-12). The book presents the overview of FGM/C in Ethiopia and discusses how FGM/C is practised in different parts of Ethiopia.

In Wolaita, women are still expected to sustain the fortunes of men at the expense of their lives. It should be noted that FGM/C is perpetuated due to the belief that the practice brings good luck for their husbands as they perform FGM/C just before their marriage. In a traditional marriage, girls experience FGM/C and recover from the practice at their mother's house before the actual wedding

⁶⁷ This book was first printed in 2005 (English), then translated and printed in other Ethiopian languages: in 2006 (Amharic), 2007 (Hadiya), 2009 (Wolaita), 2009 (Oromia). The WKHC Women Ministers Holistic Training Center uses the Amharic version of the book. The book has seven chapters. The first chapter discusses the background and it includes terminology, the history of female genital mutilation, the extent of FGM/C, and types of FGM/C. In chapter two, we see case studies from some countries: Ethiopia, Sierra Leone, Kenya, Republic of Guinea, and Egypt. Chapter three talks about the Bible, God, and our bodies. In chapter four, Wilcox explores more with regards to the Bible, culture and change. The other chapter deals with a medical response to FGM/C. Chapter six discusses change and resistance to change. The last chapter is all about 'help for the hurting'.

day. However, if the girls were married forcefully before they experience FGM/C, the procedure had to take place in the house of the mother-in-law (Berhane-Selassie, 1991:25).

The WKHC Women Ministry, a ministry that attempts to end FGM/C and promote the flourishing of women in Wolaita, has experience less attention from the Church leaders. This could be due to the fact that the women's ministry is not recognized in the church. The role of women seems to be restricted to singing, praying, counselling, and cleaning the Church but the Church leaders do not allow women to preach or lead the congregations (Tantu, 2009:15). In the same vein, women's responsibilities are specific and limited in WKHC. These include teaching women fellowship, teaching in Sunday school, and merely leading choirs. But the main offices like being a pastor, leader and deacons are reserved to men (Tantu, 2009:23). As a result, there are some challenges for women in ministry such as absence of communication with women ministry, ignorance of women about their ministry, lack of teaching and training for women, less understanding of Scriptures, and others (Tantu, 2009:15). It appears that the WKHC assumes addressing social concerns that are related with gender as merely "women's issues". FGM/C is, in this regard, included in the WKHC women ministry but not in the WKHC development arm.

4.4. Other Churches and Faith-Based Organizations engagements in the struggle against Female Genital Mutilation/Cutting

FBOs have an enormous reach and potential to address social problems that affect the well-being of women and children in any society. With this awareness, many Ethiopian churches are attempting to engage in the fight against FGM/C. In 2017, research was done on Ethiopian FBOs' responses to FGM/C and CEFM (Child, and Early and Forced Marriage) (Iftu Training, Research and Consultancy, 2017:6).

In Ethiopia, the Norwegian Church Aid (NCA) has been working with FBOs to address FGM/C for the past decade. Although FBOs are engaged in the struggle against FGM/C and CEFM their efforts were not assessed for the past seven years. For this reason, NCA attempted to take the initiative in consolidating their efforts regarding FGM/C and CEFM (Iftu Training, Research and Consultancy, 2017:5). The assessment focuses on eight organizations: Inter-Religious Council of Ethiopia (IRCE) and its 7-member organizations. These include the Ethiopian Orthodox Tewahedo Church (EOTC), Ethiopian Catholic Church (ECC), Ethiopian Islamic Affairs Supreme Council

(EIASC), Ethiopian Seventh Day Adventist Church (SDAC), Evangelical Churches Fellowship of Ethiopia (ECFE), Ethiopian Evangelical Church Mekane Yesus (EECMY) and Ethiopian Kale Heywet Church (EKHC) (Iftu Training, Research and Consultancy, 2017:6).

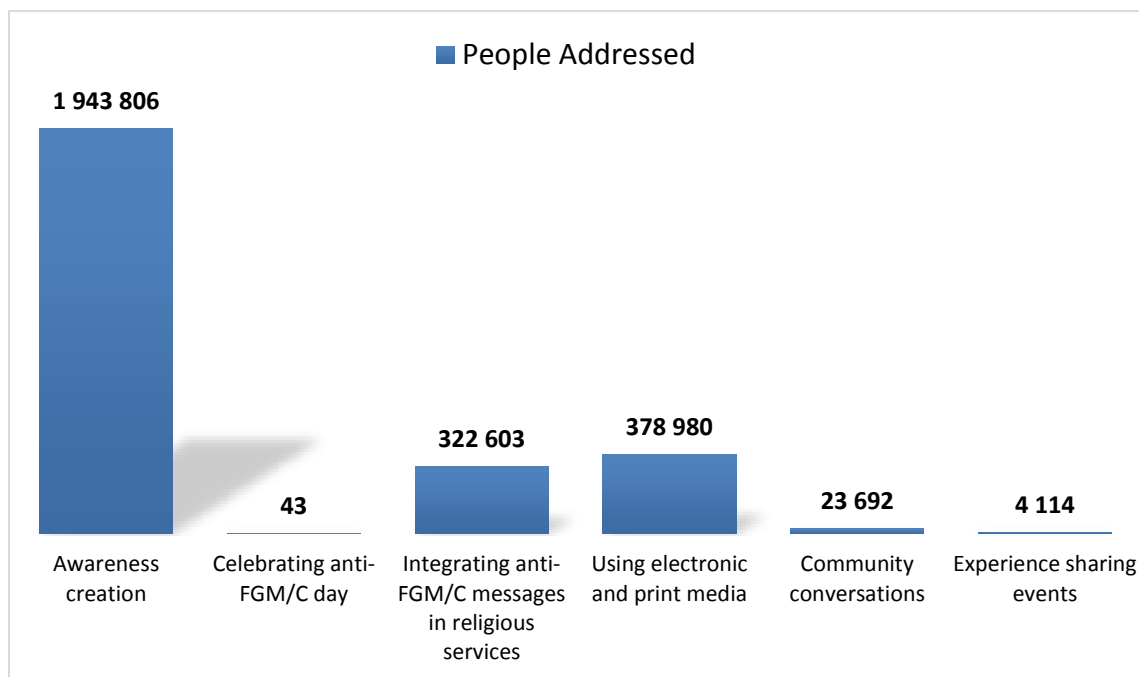
In the past six years, FBOs in Ethiopia attempted to address FGM/C and child marriage. All the seven IRCE member FBOs operate from their headquarters in Addis Ababa and they have organizational structures that encompass from national to Woreda/Kebele level. They have focal persons who coordinate their interventions in the struggle against HTPs (Iftu Training, Research and Consultancy, 2017:6). Most of the FBOs work in all the nine regions and the two city administrations of the country. In addition to the national and regional level interventions, the FBOs have grassroots project activities in more than 47 Woredas in over 10 zones in Oromiya, Tigray, Amhara, and SNNPR. The engagements of the FBOs vary in terms of the depth and width of intervention to abandon FGM/C (Iftu Training, Research and Consultancy, 2017:6).

The Iftu Training, Research and Consultancy (2017:6) further notes that six out of the eight assessed FBOs have position statements on FGM/C between 2009 and 2014. The position statements vary in detailed reasoning and size of the contents. FBOs have different rationale for their engagements in addressing FGM/C. For instance, some would say FGM/C is against the teaching of their faith, and/or the practice violates the rights of girls and women. Other FBOs would be engaged in order to reduce the suffering of women caused by the effects of FGM/C and to mitigate the negative social and personal consequences of the practice. In addition, there exists other FBOs that have external factors such as lessons from the initiative of other FBOs. In this regard, the motivation from funding organizations encourages them to start or scale their efforts in addressing the problem (Iftu Training, Research and Consultancy, 2017:6). This is the EKHCCDC's position statement on FGM/C:

EKHCCDC has been denouncing the practice since early 1950's through the local congregations though its practical and organized project based activities have started in 2000. EKHCCDC regards the practice as a sin that deserves punishment. It is a violation to the Word of God. EKHCCDC understands that there is no a biblical background to support the female circumcision. Therefore, it denounces the practice as a sin (Romans 6:23) (Iftu Training, Research and Consultancy, 2017:72).

Moreover, the Ethiopian FBOs reached 1,943,806 people with anti-FGM/C messages through different awareness creation activities in the last seven years (from 2009 to 2016) (Ifu Training, Research and Consultancy, 2017:7). These include integrating anti-FGM/C messages with mass religious services, distributing the messages through electronic and print media, organizing workshops, and facilitating community conversations (Ifu Training, Research and Consultancy, 2017:7). From 2009 to 2016, FBOs used various methods (including sharing anti-FGM/C messages) in order to reach their constitutions and the communities they target (Ifu Training, Research and Consultancy, 2017:40).

Figure 4.1: Number of people addressed by awareness creation workshops⁶⁸



Theological schools and colleges are used as FBO's vehicles in disseminating and sustaining theological doctrines of the faith groups. With this awareness, some FBOs focused on theological schools and colleges to create their awareness and responsibility about HTPs that affect the flourishing of women. Therefore, the theological schools/colleges from different FBOs engaged in various awareness creation activities and trainings on FGM/C in order to integrate their

⁶⁸ Ifu Training, Research and Consultancy, 2017. *Concerted Efforts of Faith-Based Organizations to Abandon Female Genital Mutilation & Child Marriage in Ethiopia: A Consolidated Report*. Submitted to: Norwegian Church Aid, Addis Ababa, Ethiopia, 40.

theological educations with different issues such as FGM/C, GBV, and CEFM. Through theological colleges and outreach services, FBOs were able to reach 67,987 people from them 3,345 were theologians and key faith leaders (Iftu Training, Research and Consultancy, 2017:42-3).

Furthermore, the Ethiopian FBOs have done commendable work in producing various kinds of resource materials for awareness creation and trainings on FGM/C (Iftu Training, Research and Consultancy, 2017:43). The materials that the FBOs use for awareness creation and training activities include books, booklets, manuals, and brochures. The titles of some of the resources include Theological Reflections on FGM/C, Developmental Bible, Tamar Campaign, FGM/C integration manual, etc. (Iftu Training, Research and Consultancy (2017:7).

In the same vein, the Norwegian Church Aid (NCA) values the influence and unique ability of FBOs and their potential in social development. This is true in the religious country like Ethiopia, where 96.7% of the population are assumed to be followers of a certain religious institution. Therefore, religious institutions have a proved credibility and strong grassroots structures that help them to mobilise their followers for development interventions, including education, health, and service delivery (Norwegian Church Aid, 2015:1).

Currently the NCA is working with the Ethiopian Evangelical Church Mekane Yesus Development and Social Commission, the Ethiopian Orthodox Tewahdo Church – Development and Inter Church Aid Commission, the Ethiopian Catholic Church – Social and Development Commission, the Ethiopian Islamic Affairs Supreme Council – Ethiopian Muslims Development Agency, Inter-Religious Council of Ethiopia, and the Evangelical Churches Fellowship of Ethiopia to eliminate FGM/C and ultimately improve the health and well-being of women and girls (Norwegian Church Aid, 2015:1). This implies that EKHC, the denomination that this study focuses on, is no longer a partner with NCA. However, through the financial support from Kindernothilfe (KNH), a German-based charity, the EKHC engaged and contributed much in ending FGM/C in Ethiopia (Iftu Training, Research and Consultancy, 2017:31).

According to the NCA⁶⁹, FBOs and other development partners of NCA contributed in the struggle against FGM/C and other forms of HTPs at national and grassroots level. According to the NCA survey, between 2011 and 2015, the FBOs in Ethiopia have made encouraging steps in ending FGM/C and other HTPs. They declared officially such kinds of practices have no religious basis and incorporated the practices in the ‘Follow Up National Survey on Harmful Traditional Practices in Ethiopia’. As a result, the FBOs decided to educate their followers during sermons by including teaching and theological curriculums about the practices in order to challenge long-standing norms (Norwegian Church Aid, 2015:1).

The Population Media Center of Ethiopia survey notes that the FBOs made efforts to ban the practice of FGM/C in Ethiopia. The FBOs, women’s associations, youth clubs, and community members engaged in advocating for banning of FGM/C. As a result, there was changing attitudes towards FGM/C and the prevalence of the practice was reduced. It is believed that there are many uncircumcised girls, who are between 9-15 years old, in different areas such as Kambatta, Wolaita, Hadiya, Sidama, and Alaba (Birhan Research and Development Consultancy, 2007:41). These girls have been continuously visited and trained by the Change Agents of the EKHC. However, this has been supplemented by the involvement of other uncircumcised girls who are under the training and follow up of other NGOs. In Damot Gale Woreda, there are 7,196 uncircumcised girls who are between 8-15 years old based on the document from the WKHC office in Boditi town (Birhan Research and Development Consultancy, 2007:41).

4.5. Conclusion

The Church has both the obligation and the mandate to reach out the larger community in terms of attending to its economic, social, psychological, and spiritual needs. With this awareness, the EKHC engaged in the struggle against FGM/C in Ethiopia. However, it appears that the Wolaita Kale Heywet Church’s efforts is very limited in the struggle against FGM/C in Wolaita where men attempt to control the sexual desire of women through the practice of FGM/C (Yayehyirad, 2008:107). In the past, Wolaita women were considered as less human and unable to learn (Balisky, 2009:114). Despite the challenges the WKHC, Women Ministry is attempting to engage

⁶⁹ Both publications: Review of 9 partners’ contribution 2009-2008, and the Experience of Norwegian Church Aid’s Partners 2011-2015

in the struggles against FGM/C in order to promote the flourishing of Wolaita women. However, this has not been mainstreamed sufficiently within the WKHC's development arm. It therefore appears that the WKHC assumes addressing social concerns related to gender as merely "women's issues". Thus, FGM/C is included in the WKHC women ministry but not in the WKHC development arm. However, the current situation of the Wolaita women is at a high risk of FGM/C due to limited involvement of FBOs, social norms, the position of women and girls in the society and others, which re-emphasizes the need for this issue to be mainstreamed.

Chapter five evaluates the engagements of both the EKHC and the WKHC in the fight against FGM/C. It also provides the conclusions drawn from conducting this study. Lastly, recommendations will be made, based on the evaluations, on how the WKHC can be involved in ending FGM/C in an attempt to promote women flourishing in Wolaita.

Chapter Five

Key Findings, Recommendations and Final Conclusions

5.1. Introduction

This chapter summarises the findings of the previous chapter in order to provide recommendations and conclude the study. The chapter has three main parts with brief explanations. The first section summarises each chapter of this study. The next section will present key research findings by reviewing the engagements of both EKHC and the WKHC in the struggle against FGM/C. This highlights how the Church addresses the practice of FGM/C at both the head office and the district office levels. The third section will provide recommendations with regard to the role that the church can play in ending FGM/C. This is done in order to promote women flourishing in Wolaita and beyond. It should be noted that the recommendations of this study are largely directed to the Ethiopian Kale Heywet Church, the Wolaita Kale Heywet Church (including the Development arm and the Women Ministry) as well as Wolaita men. The last section will conclude the study.

5.2. Summary of Chapters

The first chapter introduced the thesis and presented my motivation for addressing the study with regard to the practice of FGM/C in Ethiopia, particularly in Wolaita. FGM/C is one of the harmful traditional practices (HTP) that affects the flourishing of women in Wolaita. As a person who was raised by a widow, I stand with women to advocate the Church's engagement in the struggle against FGM/C in order to promote the flourishing of women in Wolaita and beyond. After reviewing relevant literature from different sources and exploring the research question, the chapter discussed the objectives of the study, methodology, limitations, its positioning within Practical Theology and defined key concepts. As discussed in chapter 1 section 9, women's experience is one of the vital interpretive categories in both feminist theory and feminist theology. Nevertheless, FGM/C affects the flourishing of women and their experiences to do theology in a different way. Thus, this study attempts to address FGM/C as it intersects with the fields of the Gender, Health and Theology.

Chapter 2 focused on FGM/C and its consequences for health. This included the use of terminology, the nature of the practice from a public health perspective, the consequences of FGM/C for health (both the physical complications and psychological problems), how FGM/C is perceived in Africa, and the prevalence of FGM/C in Ethiopia and governmental measures for its eradication. Since FGM/C affects the health and well-being of women, the Ethiopian government engaged in the struggles against FGM/C in order to promote the flourishing of women in the country. FGM/C violates the injunction of the Ethiopian constitution (the International agreements in protecting and promoting of human rights) “do no harm”, and the practice is unethical by any standards as discussed in section 5.

Chapter 3 discussed the notion of flourishing in an attempt to argue for flourishing as a theological lens in the struggle against FGM/C. The chapter discussed the term flourishing, the source of human flourishing, and the centrality of human flourishing. The chapter also explored African Feminist theology as embodied theology (this section includes both an African critique of eccentric flourishing and flourishing as a critique of dualistic notions of salvation) and the flourishing of women in Ethiopian context (*Maccasaa Zooxissuwa*). The previous sections discussed flourishing as a critique of dualistic notions of salvation and flourishing as a balanced metaphor or a holistic understanding of salvation. Therefore, the last section explored how flourishing as a holistic understanding of salvation interconnected with the embodied approach of African Women Theologians at the intersection of gender, development and theology.

Chapter 4 explored the WKHC and its efforts with regard to Gender and Development, and FGM/C in particular. The chapter also discussed the broader context of Ethiopia in relation to the marginalisation of women and harmful traditional practices as well as the EKHC and its engagement in the fight against FGM/C. Despite the challenges, the WKHC Women Ministry is engaging in the struggles against FGM/C in order to promote the flourishing of Wolaita women. This has, however, not been mainstreamed sufficiently within the WKHC’s development arm. It appears that the WKHC assumes addressing social concerns that are related to gender as merely “women’s issues”. Thus, FGM/C is included in the WKHC women ministry, but not in the WKHC development arm. However, the current situation of the Wolaita women is at a high risk of FGM/C due to limited involvement of FBOs, social norms, the position of women and girls in the society and others, which re-emphasizes the need for this issue to be mainstreamed.

Finally, the current chapter concludes the study by summarising each chapter in the first section before presenting key research findings. The chapter also gives some recommendations with regard to the role that the church can play in ending FGM/C in an attempt to promote the flourishing of women in Wolaita and beyond. It should be noted that the recommendations of this study are largely directed to the Ethiopian Kale Heywet Church, the Wolaita Kale Heywet Church (including both the Development arm and Women Ministry), and Wolaita men. The last section of this chapter highlights the conclusions that can be drawn from the study.

5.3. Key Research Findings

1. FGM/C is a real problem that causes an adverse effect on the overall well-being of women.

FGM/C as the partial or complete removal of the external female genitals for cultural reasons and its origin is unknown. FGM/C obliterates sexual pleasure, causes severe health problems, and has been known to lead to death (Chapter 2: section 2). It is, nevertheless, important to note that the practitioners of FGM/C still believe that the procedure enhances the girl's health, hygiene, chastity, fertility, and marriage prospects. Such a belief makes it difficult for people to confront this practice (Chapter 2: section 2).

2. FGM/C has a high prevalence both globally and within Ethiopia. It has been mentioned that, today, more than 130 million living women have experienced FGM/C (cf. Chapter 2: section 4 & 5). Over 3 million women experience FGM/C every year. Without intervention, up to 63 million women could experience FGM/C by 2050. In Ethiopia, the prevalence of FGM/C is very high in Somali and Afar (98.5 and 98.4% respectively), followed by Wolaita and Hadiya (92.3% both). Sixty-eight percent of rural women are circumcised, as compared with 54% of women in urban areas. The prevalence of FGM/C is third-highest in Wolaita (92.3%).

3. FGM/C is a patriarchal practice that contributes to gender inequality. Chapter 3 section 5 explored that although FGM/C is mostly performed by women, the practice intends to control the sexual desire of women for the benefit of men. Unfortunately, women uphold this practice since it is one of the requirements of marriage and societies that practice it, use it to ensure virginity until marriage. In FGM/C practising communities, marriage is perceived as the only acceptable and significant role for women, and this means only women who have undergone FGM/C are eligible to marry. As a patriarchal practice, FGM/C reinforces male dominance and that causes harm not

only on women who have experienced FGM/C, but it has a negative impact on every woman. Consequently, this contributes to gender inequality (Chapter 3: section 5).

4. Harmful traditional practices such as FGM/C are linked with gender-based violence. The international community has recognized FGM/C as a form of violence and the practice included in Article 1 of the Declaration on the Elimination of Violence Against Women. Thus, FGM/C is “regarded as an ‘act of gender-based violence’ that ‘results in... harm or suffering to women’” (Rahman and Toubia, 2000:25). Gender-based violence primarily affects the health and well-being of women and girls. It has shocking effect upon quality of life, dignity and health and contributes to impoverishment of families and communities. Gender-based violence is the most serious global health problems since it is a direct cause of death for women and girls (cf. Chapter 2 section 2).

5. FGM/C is the worst of the harmful traditional practices widely practised in Wolaita Chapter 1 section 4 discussed that more than 80% Wolaita women have experienced FGM/C. Despite FGM/C’s illegality it is still practiced secretly in Wolaita. The Wolaita people use different techniques to do FGM/C. These include sending girls to other places (e.g. to their relative’s home), pretending that girls are ill, doing FGM/C at midnight, spreading misinformation about FGM/C, merging the mutilation of boys with girls, and sometimes the mother or father hides the practice from the other parent.

6. The Control of women’s sexual desires is the main motivation of performing FGM/C in Wolaita. The main motivation for continuing the practice of FGM/C is culturally grounded, as the Wolaita people believe that the practice of FGM/C helps them to control women’s sexual desires. Although women perform mainly FGM/C, it is impossible to mask the male-centeredness of the practice, the ultimate cause that leads women to uphold the practice. In a patriarchal society, men demand FGM/C as a requirement of marriage. Therefore, women attempt to uphold consciously or unconsciously the patriarchal practices like FGM/C because they assume that “submitting” to the existing social setting is the only way to survive (cf. Chapter 2: section 2).

7. Flourishing as a holistic metaphor for salvation in addressing issues at the intersection of wellbeing and justice. Although the theme of flourishing is included in the Bible, the focus of Christian theology has often been on a dualistic understanding of salvation that does not include the whole of life. Chapter 3 sections 3 and 4, therefore, propose Jantzen’s suggestion that we give

attention to nativity rather than mortality and utilize the notion of flourishing as a positive concept that advocates for fertile life, rather than that of salvation. This is because salvation often refers to the rescue from a crisis. Thus, flourishing promotes a careful fostering of connectedness and care in which every species blossoms and further promotes the flourishing of all human beings including women who experience FGM/C in a patriarchal society like that of Wolaita.

8. Eccentric flourishing may be critiqued as un-African and divorced from feminism. Chapter 3 section 3 discussed that the notion of flourishing is argued for the notion of “eccentric flourishing” but such kind of flourishing limits women’s freedom to search God through their own experience. Thus, the notion of eccentric flourishing is, here, deemed un-African because African women find their centre in their own experiences (not just outside of themselves) and they do theologies with their whole being. It was therefore deduced that African women theology needs an Africanised flourishing, a flourishing that gives freedom for African women to search God through their own experience. Since African women do theologies with their whole beings they may rediscover God, a name to the reality that they encounter but not an intellectual proposition that transcends from their own experience (cf. Chapter 3: section 3).

9. The EKHC’s engagement in the struggle against the practice of FGM/C is limited due to lack of funds. In the past, EKHC worked in 20 Woredas focusing on FGM/C both in Oromiya and the southern regions. The major funding for anti-harmful traditional practices interventions, with a focus on FGM/C, came from the government of German through KNH [Kindernothilfe], a German-based charity. Nevertheless, currently the EKHC operates in only one district due to a funding shortage (cf. Chapter 4: section 2).

10. The WKHC development arm assumes FGM/C as merely “women’s issue” but not as the issue of development. It appears that the WKHC assumes addressing social concerns that are related with gender as merely “women’s issues”. Thus, FGM/C is included in the WKHC women ministry but not in the WKHC development arm. However, issues that affect women concern all human beings and the flourishing of women benefits all human beings, not only women as it discussed in Chapter 1 Section 3. Although the WKHC Women Ministry tries to end FGM/C by promoting the flourishing of women in Wolaita the ministry got less attention from the Church leaders (cf. Chapter 4 section 3).

11. Ministry in WKHC depends on “gender” but not gifts. Chapter 4 Section 3 explored the fact that women in the WKHC are only allowed for singing, praying, counselling, and cleaning the churches, however, the Church leaders do not allow women to preach or lead the congregations. Women’s responsibilities are specific and limited. These include teaching in the women fellowship, teaching in Sunday school, and leading choirs. Key leadership positions such as pastor, leader and deacons are reserved for men. Since the WKHC has male leadership FGM/C is not being addressed within WKHC. Those who are in authority have less concern for FGM/C because it is not their experience.

12. There is a need to create awareness in Wolaita and connect the link between FGM/C and its consequences. There is still a misunderstanding about the consequences of FGM/C among the Wolaita people. This implies that the government has very limited efforts in creating awareness regarding FGM/C. Thus, the Church and FBOs should engage in the struggles against FGM/C in order to create awareness by showing the link between FGM/C and its consequences (cf. Chapter 4: section 4).

5.4. Recommendations

1. The Church should work to create awareness about the practice of FGM/C within the Church and wider society. Currently, Wolaita women are at a high risk of FGM/C because of the limited involvement of faith-based organizations, social norms and the culturally determined position of women and girls in the community. As it discussed in chapter 4 section 3, the WKHC is not playing her role well in ending FGM/C to promote the flourishing of Wolaita women. However, the church has both the obligation and the mandate to reach out the larger community in terms of attending to its economic, social, psychological, and spiritual needs. Therefore, the WKHC must create awareness among Wolaita people by showing the link between FGM/C and its consequences.

2. EKHC should expand its projects to end the practice of FGM/C. Currently the EKHC operates in only one district due to a funding shortage (Chapter 4: section 2). Therefore, EKHC needs to mobilize its members to fund such initiatives and expand its projects to Wolaita, a place where the prevalence of FGM/C is very high. Also, the church should partner with international

and local NGOs such as Norwegian Church Aid (AID), *Kembatti Mentti Gezzima* (KMG), and others in order to improve its engagement in the struggle against FGM/C.

3. EKHC should make its intervention sustainable. One of the challenges in fighting against FGM/C is the practitioners' use of the practice as a source of income. When the practitioners are provided with means of income, FGM/C need no longer be a source of income and the change can be sustained. With this awareness, the EKHC attempted to design and implement alternative income generating activities for FGM/C practitioners, however, there is no salary for the change agents or volunteers because they receive only loans. Though, the researcher suggests that stipends can be a better alternative to bring sustainability for such kind of intervention.

4. The WKHC development arm needs a holistic understanding of development to address FGM/C or other issues that affect the health and well-being of women. The WKHC should not assume that addressing social concerns that are related with gender as merely "women's issues". In Wolaita, the government of Ethiopia and non-governmental organisations are trying to address the issue of FGM/C, however, there is still a gap with regards to the Church's response. As Bowers Du Toit (2016:6) notes, "Our *diakonia* cannot be divorced from the quest for social justice and therefore our theological engagement and discourse must be one that keeps poverty and justice in tension with each other – radicalising our understanding of the churches position with regards to the powers of the state and market". FGM/C is the issue of justice because the practice affects the rights and dignity of women. FGM/C is also the issue of development because it affects the health and well-being of women. Therefore, FGM/C must be included in the WKHC development arm as it is included in the WKHC women ministry.

5. The WKHC needs to provide pastoral care and counselling to those whose lives are affected by FGM/C. Patricia Zulkosky (1990:434-435) suggests the following to pastoral caregivers, who are interested to integrate the insights of feminist theology in pastoral care, and the suggestions are very important for the WKHC as they engage in helping those who are devastated by FGM/C:

- Considering that women who experienced FGM/C are interested to engage with a woman caregiver who has experience on such kind of issue;
- Use inclusive language except for the situation that refers to a gender-specific;

- Prioritize women’s empowerment rather than just focusing on coping adjustment;
- Encourage women to find models of strong women through wise-women imagery, suggested reading, and women’s support (consciousness-raising) groups;
- Create a conducive environment to development a new and stronger self-concept through personal and community experiences;
- Engage problematic scriptural texts by exploring and reinterpreting;
- Redefine the right place of women in history by rereading and reinterpreting Biblical myths;
- Be careful not to impose the experience of male upon women without checking its appropriateness;
- Encourage to experiment new behaviours;
- Be willing to work even through discomfort that is caused by these issues with a co-worker or supervisor;
- Consider women as your fellow human who are created in the image of God.

6. WKHC Women Ministry needs to improve their ministries to promote the flourishing of women. As the biblical women searched Jesus at the tomb, Wolaita women are still searching for the real God through their own experience. However, FGM/C is affecting women and the body that they use to do theologies. Therefore, the WKHC Women Ministry should promote women’s freedom to search God through their own experience as they engage in the struggle against FGM/C. The ministry should provide a “safe space” where women feel at home and express themselves without fear. The WKHC Women Ministry leaders must play the role of promoting consciousness⁷⁰ raising groups among Wolaita women. Because “conscientization is needed in this regard to raise the awareness of women so that they could be the main interlocutors of their own liberation” (Teklu, 2006:67).

⁷⁰ “This is something that takes place at, at least, two ends of a ‘relationship’ – there is conscientization of those who are causing injustice [oppression] even unwittingly, bringing them to an awareness of what is that they are part and it also takes place at the other end of the link, among the oppressed.” Teklu, T. A. 2006. *Female Genital Mutilation as a Risk Factor for HIV Transmission in the Cultural Context of Kembatta People: A Theological Anthropological Critique*. A Thesis Submitted in Partial Fulfillment of the Requirement for the Postgraduate Diploma in HIV and AIDS in Relation to Theological Studies at Ethiopian Graduate School of Theology (EGST), Addis Ababa, Ethiopia, 67.

7. The WKHC Development arm and Women Ministry should empower Wolaita women to engage in fighting against FGM/C. Wolaita women needs empowerment to engage in the fight that address their social realities. Thus, the WKHC Development arm and Women Ministry must create and provide opportunities for women to become economically self-dependent. When women have sustainable income generating activities that support their economic independence they are able to rethink the notion of getting married for the sake of gaining an income for survival.

8. The WKHC should gender inclusive with regards to ministry in the Church. Femininity is primarily perceived as a symbol of incapability in Wolaita. Wolaita people often mock the father of a new-born baby girl because it is believed that “femaleness” is valueless for a father. They also devalue the efforts of females in accomplishing successful deeds as it discussed in Chapter 3 Section 4. However, the Church must against the traditional thinking that rejects the flourishing of women both in the Church and wider society. The WKHC should allow women to preach or lead the congregations. In the WKHC, women must be free to serve according to their gifts and the main offices (such as being a pastor, leader and deacons) should not be reserved only to men. Female leadership can help the church to improve its efforts in the struggle against the issues that affect women including FGM/C.

9. Community conversations are needed among Wolaita people. Solving problems together is a tradition among Wolaita people. This is because, as Teklu (2006:70), “Community conversations approach promote human rights principles and discussions provide spaces for introspection, growth, and alignment of values – generating decisions and agreements”. Therefore, the WKHC should conduct community conversation among Wolaita people to end FGM/C in order to promote the flourishing of Wolaita women. Ending FGM/C should be a priority in the WKHC’s agenda and the Church must intensify its efforts to increase the awareness of people.

10. Wolaita men should participate in the struggle against harmful traditional practices that affect the flourishing of Wolaita women. In Wolaita, men are usually unwilling to engage in the issues of women and will, therefore, often keep silent regarding “women’s issues”. Nevertheless, the issue of women is the issue of all human beings and the flourishing of women benefits all human beings, and not only women. Therefore, all human beings, including men, should participate in the struggle against HTPs that affect the flourishing of women. The Wolaita men

must be a change agent in addressing the issue of FGM/C by talking with Wolaita women, but not for Wolaita women.⁷¹

11. Establishing centre to create a safe space for girls and women who refuse to go under FGM/C and empower them as change agents. Girls and women need a safe space when they run away from their homes by refusing FGM/C. Unless they find other safe spaces they are forced to experience FGM/C, or they may be forced to flee their homes to places where they may face worse challenges. Therefore, the church should create a safe space for girls and women who refuse FGM/C in Wolaita. Section 4.2.2 explored the EKH CDC success stories in strengthening collective responses through girls' clubs. Similarly, this centre can assist primary and secondary schools by organizing girls into anti-FGM/C clubs that helps them resist the stigma because of their decision not to cut.

5.5. Suggestions for Future Research

This study has attempted to indicate that FGM/C is one of the issues of gender, health, development, and theology. The study challenged the church to take a leading role in ending FGM/C to promote the flourishing of women. Therefore,

- It is hoped that an in-depth empirical study regarding the practice of FGM/C may investigate the issue further in order to address the limitation of this study.
- This study has only focused on the WKHC; therefore, it is good if further research focus on the church in Ethiopia in general through Inter Religious Council of Ethiopia.
- African women theologians should address the practice of FGM/C in their research and writings as they have addressed HIV/AIDS and women's health in general.

⁷¹ The 2013 UNICEF survey suggests that discussions about FGM/C should include men, particularly in a community where men involved in the decision making. "In most countries analysed, a similar level of support for FGM/C is found among both women and men. In Guinea, Sierra Leone and Chad, substantially more men than women want FGM/C to end, while in Egypt and Mauritania, more women than men report they would like the practice to stop. In Eritrea, important differences are found between the proportions of men and women who are uncertain about the continuation of FGM/C, with men being nearly three times less likely to express a firm opinion than their female counterparts. These findings point to the conclusion that men may, in certain contexts, be important agents of change. This suggests that discussions about FGM/C should involve not only women, but also entire communities, including men, particularly in settings where men participate in the decision-making process" (UNICEF, 2013:58-9).

5.6. Conclusion

FGM/C constitutes all procedures that remove the partial or total external female genital or damage to the female genital organs for non-medical reasons. It causes severe consequences for health, including both the immediate and long-term complications. Although FGM/C is mainly carried out by traditional practitioners, health workers are also involved in performing the practice. Motivations for the practice are complex and related to each other. However, controlling women's sexuality is one of the main motivations to perform FGM/C in Ethiopia, particularly in Wolaita, a patriarchal society (Yayehyirad, 2008:107).

The purpose of this study was an attempt to identify in what ways the Wolaita Kale Heywet Church (WKHC) can engage in the struggles against FGM/C in order to promote the flourishing of Wolaita women. Although the prevalence of FGM/C is still very high in Wolaita, the collaboration of churches, FBOs, NGOs and the government can assist the struggles against FGM/C to promote the flourishing of women.

Bibliography

- African Commission on Human and Peoples' Rights. 2003. *The African Charter on Human and Peoples' Rights*. [Online]. Available: <http://www.achpr.org/instruments/women-protocol/#5> Accessed [2017, 8 August].
- Alaro, M. B. 2014. *Factors Affecting Savings of Women Headed Households in Self Help Groups: The Case of Wolaita Sodo Town, Ethiopia*. A Thesis Submitted in Partial Fulfillment of the Requirements for the Degree of Master of Arts in Development Management at Hawassa University, Hawassa.
- August, K. Th. 2010. *Equipping the Saints: God's Measure for Development*. Bellville, South Africa: Print-Man.
- Ayesha, I., Shareen G. & Isabel M. 2017. The devil is in the details: a feminist perspective on development, women's rights, and fundamentalisms, *Gender & Development*, 25:1, 15-36, DOI: 10.1080/13552074.2017.1286803.
- Balisky, E. P. 2009. *Wolaita Evangelists: A Study of Religious Innovation in Southern Ethiopia, 1937-1975*. Eugene: Pickwick Publications.
- Berhane-Selassie, T. 1991. Gender and Occupational Potters in Wolaita: Imposed Femininity and "Mysterious Survival" in Ethiopia. in Berhane-Selassie, T. (ed.). *Gender Issues in Ethiopia*. Addis Ababa: Institute of Ethiopian Studies Addis Ababa University. pp. 15-30.
- Bekele, A. and Habtamu D. 2015. *Baseline/End line Survey: Female Genital Mutilation (FGM) Situations in Six Regions of Ethiopia*. Submitted to: Norwegian Church Aid/Save the Children International. Addis Ababa.
- Birhan Research and Development Consultancy. 2007. *Formative Research for Designing a Multi-Media Communication Programmes to Address Women's Concerns and Harmful Traditional Practices with Particular Emphasis on FGM: Findings of the Survey*. Addis Ababa: Population Media Center of Ethiopia.
- Bishop, S. 2009. Oppositional Approaches to Female Genital Mutilation (FGM) in African Literature. in Tobe Levin and Augustine H. Asaah (eds.). *Empathy and Rage: Female Genital Mutilation in African Literature*. Oxfordshire: Ayebia Clarke Publishing Limited.
- Bogaletch, A. 2008. *Literature Review on Female Genital Mutilation*. Addis Ababa: Population Media Center of Ethiopia.
- Bowers Du Toit, N. 2010. Action or Apathy? Theological Perspectives and their Influence on the Church's Engagement with Poverty: A Case Study from the Cape Flats. in I. Swart, H.

- Rocher, S. Green & J. Erasmus (Eds.), *Religion and Social Development in post-apartheid South Africa* (pp. 431-446). Stellenbosch: Sun Press.
- Bowers Du Toit, N. 2016. The elephant in the room: The need to re-discover the intersection between poverty, powerlessness, and power in “Theology and Development” praxis, *HTS Teologiese Studies/Theological Studies* 72(4), pp. 34-59.
- Burrage, H. 2016. *Female Genital Mutilation: A global journey behind the curtains of the horrifying worldwide practice of female genital mutilation*. London: New Holland Publishers Pty.
- Central Statistical Agency (CSA) [Ethiopia] and ICF. 2016. *Ethiopia Demographic and Health Survey 2016: Key Indicators Report*. Addis Ababa: CSA and ICF.
- Davis, R. J. 1984. *The Winds of God: How the gospel swept the far corners of southern Ethiopia*. Canada: SIM International Publications.
- Dora, T. 2017. *The Role of the Church in Addressing Marginalised Women to Improve the Health and Well-being of the Community: A Case Study of the Wolaita Kale Heywet Church, Southern Ethiopia*. Research proposal submitted for the Award of Postgraduate Diploma in Theology (Practical Theology – Community Development) at the University of Stellenbosch, Stellenbosch University.
- Ethiopian Kale Heywet Church. Available from: <http://www.ekhc.net/index.php/about-us-footer> [Online]. Accessed [2017, 12 March].
- Ethiopian Kale Heywet Church Communications and Literature Department, 2010. *Excellence in Holistic Transformation: Kale Heywet Magazine: No. 35*, Addis Ababa.
- Ethiopian Kale Heywet Church Development Program Commission. 2016. *FGM Project Evaluation*. Funded by: CEDAR FUND, Hong Kong.
- Ethiopian Kale Heywet Church. 2004. *Awareness Creation and Prevention of FGM Project (April 2000 - June 2004): Evaluation Report*. Addis Ababa.
- Ethiopian Kale Heywet Church Development Program, 2004. *Kucha Integrated Rural Development Project*. Addis Ababa.
- Ethiopian Kale Heywet Church Development Program. 2011. *Awareness Building Against Female Genital Mutilation*. Ethiopian Kale Heywet Church FGM Prevention and Abandonment Office: Addis Ababa.
- Ethiopian Kale Heywet Church. 2011. *FGM Project Evaluation*. Addis Ababa.

- Federal Democratic Republic of Ethiopia, 2014. *The Fifth & Sixth Periodic Country Report (2009-2013) on the Implementation of the African Charter on Human and Peoples' Rights in Ethiopia*. Submitted by the Ministry of Foreign Affairs of Ethiopia, Addis Ababa.
- Federal Democratic Republic of Ethiopia Population Census Commission Central Statistical Agency. 2010. *The 2007 Population and Housing Census of Ethiopia: Results for Southern Nations, Nationalities and Peoples' Region*. Addis Ababa.
- Federal Negarit Gazeta. 1995. *Constitution of the Federal Democratic Republic of Ethiopia Proclamation No. 1/1995*. Addis Ababa.
- Frederiks, M. 2003. Miss Jairus speaks: developments in African feminist theology. *Exchange*, 32 no. 1, pp. 66-82.
- Freeman, D. 2013. *Pentecostalism in Rural Context: Dynamics of Religion and Development in Southwest Ethiopia*. London: Equinox Publishing Ltd.
- Green, A. 2010. *Radical Judaism: Rethinking God and Tradition*. New Haven: Yale University Press.
- Henze, P. B. 2000. *Layers of Time: A History of Ethiopia*. London: Hurst & Company.
- Hirut, T. 2012. *Gender Relation, Female Genital Mutilation and Reproductive Health: The Case of Arsi Oromo, Ethiopia*. Addis Ababa: Addis Ababa University Press.
- Hogan, L. 1995. *From Women's Experience to Feminist Theology*. England: Sheffield Academic Press.
- Hollely, K. A. 2013. Female Genital Mutilation: An African Custom or a Human Rights Violation? in Mansah Prah (ed.). *Insights into Gender Equity, Equality and Power Relations in Sub-Saharan Africa*. Organisation for Social Science Research in Eastern and Southern Africa (OSSREA), Kampala: Fountain Publishers.
- Horn, N. E. and Talore T. 2006. *The EKHC Ministry and Leadership Transformation Project/Gilgal Baseline Survey: Finding of a Quantitative Study of Change in the Ethiopian Kale Heywet Church*. Addis Ababa: Ethiopian Kale Heywet Church.
- Horn, N. E. 2010. *Women in Church Leadership: Culture vs Canon*. Paper Presented at the Dialogue on Women in Leadership in the Kale Heywet Church, Addis Ababa.
- Iftu Training, Research and Consultancy, 2017. *Concerted Efforts of Faith-Based Organizations to Abandon Female Genital Mutilation & Child Marriage in Ethiopia: A Consolidated Report*. Submitted to: Norwegian Church Aid, Addis Ababa.

- Isherwood, L. & McEwan, D. 1994. *Introducing Feminist Theology*. England: Sheffield Academic Press.
- Jantzen, G. 1984. *God's World, God's Body*. Philadelphia: The Westminster Press.
- Jantzen, G. 1998. *Becoming Divine: Towards a Feminist Philosophy of Religion*. Manchester: Manchester University Press.
- Jobo, M. M. 2016. The Prejudiced Negative Images of Femininity in Wolaita Proverbs. *International Journal of Society, Culture & Language*, 4(1), pp. 58-68.
- Jones, S. 2000. *Feminist theory and Christian Theology: Cartographies of Grace*. Minneapolis: Fortress Press.
- Kanyoro, M. 2001. 'Cultural Hermeneutics: An African contribution' in Dube, M. W, *Other ways of reading: African women and the Bible*, Atlanta: Society of Biblical Literature Atlanta.
- Kanyoro, M. 2001. Engendered Communal Theology: African Women's Contribution to Theology in the Twenty-First Century. *The journal of the Britain and Ireland school of Feminist Theology*. FT 27 (2001). pp. 36-56.
- Kanyoro, M. 2002. *Introducing Feminist Cultural Hermeneutics*, Sheffield: Sheffield Academic Press.
- Kanyoro, M. 2006. 'Beads and Stands: Threading More Beads in the Story of the Circle' in Phiri, I.A., & Nadar, S. *African Women, Religion and Health: Essays in Honor of Mercey Amba Ewudziwa Oduyoye*. Pietermaritzburg, SA: Cluster Publications.
- Kassian, M. 2005. *The Feminist Mistake: The Radical Impact of Feminism on the Church and Culture*. Wheaton, Illinois: Crossway Books.
- Kebebus, A. 2006. *Ethiopian Kale Heywet Church Women Ministry Plan for the Coming Time*. Addis Ababa.
- Kelsey, D. H., 2008. On human flourishing: A theocentric perspective. (Unpublished) Paper delivered as part of a consultation within the "God and Human Flourishing" project of Yale University's Center for Faith and Religion. [Online]. Available from: <http://www.yale.edu/faith/ghf/ghf.htm> Accessed [2017, 2 March].
- KMG, 2011. *Baseline Survey on FGM and other Forms of Gender-Based Violence in Five Intervention Woredas of Wolaita Zone, SNNPR, Ethiopia*, Addis Ababa.
- KMG, 2014. *Improve Reproductive Health and Economic Condition of Women and Girls: Annual Narrative Report Submitted to Norwegian Church Aid*, Addis Ababa.

- Lorde, A. 1980. Age, Race, Class, and Sex: Women Redefining Difference. in *Sister Outsider: Essays and Speeches by Audre Lorde*. Trumansburg, NY: Crossing.
- Mara, F. A. 2012. *An Analysis of Wolaita Proverbs: Functions in Focus*. Addis Ababa: Addis Ababa University
- Marais, N. 2015. Fully alive? On God and human flourishing. in Wepener, C. & Potgieter, A. *Jong teoloë praat saam... oor God, gemeentes en geloof*. Wellington: Bybelkor. pp. 129-142.
- Meehan, F. and Mengistu, E. 2016. *Drought, Resilience, and Self Help in Ethiopia: A review of Tearfund Self Help Groups following El Niño*. Addis Ababa: USAID/Ethiopia Agriculture, Knowledge, Learning, Documentation and Policy (AKLDP) project and Tearfund Ethiopia.
- Mega, T. L. 2017. *Growth, Diversification and Efficiency of Micro and Small-Scale Enterprises: The Case of Wolaita Zone, Ethiopia*. A PhD Dissertation Presented in the School of Graduate Studies of the Wolaita Sodo University, Wolaita Sodo.
- Mwansa, L. M. 2017. Investing in Girls and Women's Education, a key to Sustainable Development!!! [Online]. Available from: <http://paf.org.zm/2017/03/investing-in-girls-and-womens-education-a-key-to-sustainable-development/?v=70f73ee5133f> Accessed [2017, 12 May].
- Myers, B. L. 2011. *Walking with the Poor: Principles and Practices of Transformational Development*. New York: Orbis Books (Revised and expanded edition).
- NCTPE, 1998, *Baseline Survey on Harmful Traditional Practices in Ethiopia*. Addis Ababa.
- Nelson, J. B. 1992. *Body Theology*. Louisville: Westminster/John Knox Press.
- Njorogo, N. J. 2002. Reclaiming our heritage of power: discovering our theological voices, Her-stories, in I.A. Phiri, D.B. Govinden & S. Nadar, *Her-stories hidden histories of women of faith in Africa*, Pietermaritzburg: Cluster Publications. pp. 42-50.
- Norwegian Church Aid – Ethiopia, 2009. *Norwegian Church Aid/Ethiopia and Partners' Engagement for the abandonment of HTPs/FGM in Ethiopia: Review of 9 partners' contribution (2002-2008)*. Addis Ababa: Norwegian Church Aid.
- Norwegian Church Aid. 2015. *Faith Based Organisations' Response for the Abandonment of Female Genital Mutilation (FGM) and other Harmful Practices in Ethiopia: The Experience of Norwegian Church Aid's Partners*. Addis Ababa: Norwegian Church Aid.
- Oduyoye, M. A. 2000. *Hearing and Knowing: Theological Reflections on Christianity in Africa*. Nairobi, Kenya: Acton Publishers.

- Oduyoye, M. A. 2001. *Introducing African Women's Theology*. England: Sheffield Academic Press.
- Rahman, A. & Toubia, N. (eds.). 2000. *Female Genital Mutilation: A Guide to Laws and Policies Worldwide*. London & New York: Zed Books.
- Rakoczy, S. 2004. *In Her Name: Women Doing Theology*. South Africa: Cluster Publications.
- Reader, J. 2008. *Reconstructing Practical Theology: The Impact of Globalization*. England: Ashgate Publishing Limited.
- Ruether, R. R. 2012. The Development of Feminist Theology: Becoming Increasingly Global and Interfaith. *Feminist Theology*, Vol. 20(3). UK: Sage Pub. pp. 185-189.
- Russell, L. M. 2004. Cultural Hermeneutics: A Postcolonial Look at Mission. *Journal of Feminist Studies in Religion*. Vol. 20, No. 1 (Spring, 2004), Indiana University Press. pp. 23-40.
- Santos, P. H. 2017. That All May Enjoy Abundant Life: A Theological Vision of Flourishing from the Margins. *Feminist Theology*, Vol. 25(3). UK: Sage Pub. pp. 228-239.
- Silva, A. S. F. 2012. Document Analysis, in Wagner C., Kawulich B. & Garner M. (eds.) *Doing Social Research: A global context*. London: McGraw-Hill Higher Education.
- Siwila, L. C. 2015. The Role of Indigenous Knowledge in African Women's Theology of Understanding Motherhood and Maternal Health. *Interdisciplinary Journal for the Study of the Arts and Humanities in Southern Africa*. Alternation Special Edition No 14 (2015). pp. 61-76
- Skaine, R. 2005. *Female Genital Mutilation: Legal, Cultural and Medical Issues*. Jefferson, North Carolina, and London: McFarland & Company, Inc., Publishers.
- Stinger, C. H. 1910. *The History of Wolayta People*. Verleger: Rudiger Koppe.
- Tafese, T. and others. 2016. *Research Report on the Impact of Self Help Group on Household Food Security (Case of TDA's Self Help Group)*. Submitted to Terepeza Development Association, Wolaita Sodo, Ethiopia.
- Tantu, T. 2009. *The Challenges of Women Ministry in Wolaita Kale Heywet Church and Its Recommendations*. A Mini Thesis Submitted to Wolaita Evangelical Seminary, Wolaita Sodo.
- Temesgen, Y. 2016. *Factors Influencing Economic Empowerment of Rural Women: The Case of Sodo Zuria Woreda, Wolaita Zone, Southern Ethiopia*. MSc Thesis Submitted to the School of Graduate Studies of the Wolaita Sodo University, Wolaita Sodo.

- Terepeza Development Association. 2017. *Terepeza Development Association ongoing Projects*. Terepeza Development Association, Wolaita Sodo.
- Tesfaye, S. and others (eds.). 2015. *Impacts of Women Development and Change Packages on the Socio-Economic and Political Status of Women in SNNPR: Promise, Success and Challenges*. Hawassa: Center for Policy and Development Research (CPDR), Hawassa University.
- Thabo Mbeki, Former President of South Africa, speech in the 120 years of Adwa Victory celebration. [Online]. Available from: https://www.youtube.com/watch?v=624BaD6wKIQ&feature=player_embedded Accessed [2017, 2 March].
- The Democratic Republic of Ethiopia Ministry of Health, 2016. *Management of Health Complications & Prevention of Female Genital Mutilation/Cutting: Participants' Manual*. Addis Ababa: The Democratic Republic of Ethiopia Ministry of Health.
- Trisk, J. 2008. 'Spirings of Newness and Beauty' Grace Jantzen and the Search for God. *Scriptura* 98, College of the Transfiguration, Grahamstown, pp. 194-203.
- Trisk, J. 2012. "Grace Jantzen (1948-2006) – 'They Shall Flourish as a Garden'". in Conradie, E. M. (ed.). *Creation and Salvation (volume 2): A Companion on Recent Theological Movements*. Berlin: LIT Verlag, pp. 259-263.
- United Nations Children's Fund. 2003. Female Genital Cutting: Painful procedures in the name of tradition. [Online]. Available from: https://www.unicef.org/infobycountry/ethiopia_18246.html Accessed [2017, 4 April].
- United Nations Children's Fund, 2013. *Female Genital Mutilation/Cutting: A statistical overview and exploration of the dynamics of change*, New York: UNICEF.
- United Nations Children's Fund. 2003. *Female Genital Cutting: Painful procedures in the name of tradition*. [Online]. Available from: https://www.unicef.org/infobycountry/ethiopia_18246.html Accessed [2017, 4 April].
- Volf, M. 2011. *A Public Faith: How Followers of Christ Should Serve the Common Good*. Grand Rapids, Michigan: Brazos Press.
- Weingärtner, L. Pichon, F. and Simonet, C. 2017. *Report how self-help groups strengthen resilience: A study of Tearfund's approach to tackling food insecurity in protracted crises in Ethiopia*, London: Tearfund.
- White, S. V. & Others. 2002. *Dispossessing the Widow: Gender Based Violence in Malawi*. Blantyre: Christian Literature Association in Malawi (CLAIM).

- Willcox, S. 2005. *Cut Flowers: Female Genital Mutilation and a Biblical Response*. Addis Ababa, Ethiopia: SIM Press.
- Wolaita Kale Heywet Church. 2017. *Wolaita Ketena Kale Heywet Church Report: Spiritual Ministry*, Wolaita Sodo.
- Wolaita Kale Heywet Church Women Ministry. 2015. *The Wolaita Kale Heywet Church Women Ministers Holistic Training Center Manual*. Wolaita Sodo.
- Women and Children Affairs Office of the Wolaita Zone. 2016. *Research on Female Genital Mutilation and Harmful Traditional Practices in Wolaita Zone*.
- World Health Organization (WHO). 2008. *Eliminating Female genital mutilation: An interagency statement OHCHR, UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCR, UNICEF, UNIFEM, WHO*. Geneva, Switzerland: WHO Press.
- World Health Organization (WHO). 2012. *Understanding and Addressing Violence Against Women: Female Genital Mutilation*. [Online]. Available: http://apps.who.int/iris/bitstream/10665/77428/1/WHO_RHR_12.41_eng.pdf Accessed [2017, 5 June].
- Wotango, T. H. 2009. *Regaining a Perspective on Holistic Mission: An Assessment of the Role of the Wolaita Zone Kale Heywet Church in Southern Ethiopia*. North West University, South Africa.
- Wootton, J. H. 2000. *Introducing a Praxical Feminist Theology of Worship: Introduction in Feminist Theology*. England: Sheffield Academic Press.
- Yayehyirad, K and others (eds.). 2008. *Old Beyond Imaginings: Ethiopia Harmful Traditional Practices (Second Edition)*. Addis Ababa: EGLDAM, Ye Ethiopia Goji Limadawi Dirgitoch Aswogaj Mahiber (The Former National Committee for Traditional Practices in Ethiopia – NCTPE).
- Yayehyirad, K (ed.). 2013. *Theological Reflection on the Teaching of Ethiopian Orthodox Tewahedo Church on Female Circumcision*. Addis Ababa: The Ethiopian Orthodox Tewahedo Church Development and Inter Church Aid Commission HIV/AIDS Prevention and Control Department.
- Young, P. D. 1990. *Feminist Theology/Christian Theology: In Search of Method*. Eugene: Wipf and Stock Publishers.

Appendix

From: Siltanu Shiferaw <siltanushiferaw@yahoo.com>
To: Tihitina Telemos Dora <titutale@yahoo.com>
Sent: Thursday, April 6, 2017, 9:59:05 AM GMT+2
Subject: about permission letter

Tihitina Telemos Dora
Faculty of Theology
University of Stellenbosch
171 Dorp Street
Stellenbosch
7600

Sub: Permission to conduct a research

Greetings to you in the name of our Lord Jesus Christ!

We are very happy for your interest to conduct a research on our church. We hope that your MTh thesis will help our church as we attempting to give holistic ministry in Wolaita and beyond. Therefore, please note that we allowed you to access and use the available materials in our archives such as reports, minutes, etc.

We wish you all the best with your studies!

Yours faithfully,

Siltanu Shiferaw
General Secretary
Wolaita Kale Heywet Church
Wolaita Sodo, Ethiopia
Cell Phone: (+251) 913941805