UNFPA-UNICEF Joint Programme on the elimination of Female Genital Mutilation (FGM) in Ethiopia contributes to the national commitment to end FGM and child marriage by 2025, and to achieve SDG target 5.3 by 2030. The programme is led by the Ministry of Women and Social Affairs. It also plays catalytic role via the National Alliance to End FGM and Child Marriage, which engages over 60 memberships from other ministries, civil society, non-governmental organizations and UN entities. The programme envisions to implement the national costed roadmap and accelerate institutional, individual and community level efforts as to end FGM by 2030, the country requires to progress eight times faster than what has been observed in the past 15 years.
FGM PREVALENCE

Female genital mutilation is still prevalent in Ethiopia. **25 million girls and women** in Ethiopia have undergone FGM, the largest absolute number in Eastern and Southern Africa. However, FGM has been declining in Ethiopia.

In 2000, about 35% of people thought FGM should stop; in 2016 this percentage was 82% (Source: DHS 2016)
In Ethiopia, 25% of girls who experience FGM undergo the practice within the first year of their life. However, age of FGM varies substantially by region and religion: in Amhara (92%), Afar (89.5%), and Benishangul-Gumuz (76.5%) most children undergo the practice when they are younger than 5 years of age, whereas in Oromia (31.8%), SNNPR (30.6%), and Somali (12.8%) these percentages are much lower, as in these regions the practice of cutting is more spread across age-groups.
FGM PREVALENCE BY REGION

- FGM is practiced across all regions, religions and ethnic groups in Ethiopia.
- Almost all FGM is carried out by ‘traditional practitioners’ (87.3%).
- The region with the highest prevalence is Somali, at 98.5%, while the lowest prevalence is in Tigray, at 24.2%.
- FGM prevalence in rural areas is higher (68.4% of women aged 15-49) than in urban areas (53.9%).

In Ethiopia, cross-border FGM is still reported practice among many cross-border communities’ social and cultural identities. In 2019, five East African countries including Ethiopia adopted the Declaration and Action Plan to End Cross-border FGM.

From November 2020 to November 2022, there were growing humanitarian needs driven by the lack of a peaceful solution to the conflict in northern Ethiopia. In eastern and southern Ethiopia, communities suffered the impacts of climate-related shocks, particularly the severe drought affecting the livelihoods of nearly 17 million pastoralists. The reduced availability of food, water, and pastures has triggered internal displacement and deepened food insecurity, exacerbating protection risks.
SINCE 2018, LAW ENFORCEMENT RESULTED IN

243 ARRESTS

208 CASES BROUGHT TO COURT

127 CONVICTIONS AND SANCTIONS

Source: UNFPA-UNICEF JP FGM Programme Data
If current trends continue, FGM-associated annual healthcare costs will be nearly 100 million USD by 2030. 

Source: https://srhr.org/fgmcost/cost-calculator/
ETHIOPIA COUNTRY PROFILE

SOME ACHIEVEMENTS SINCE 2018

4.3 million individuals reached through campaigns promoting gender equality and FGM elimination

1,125,680 People engaged in public declaration that they will abandon the practice of FGM

17,157 religious leaders and community/traditional influencers publicly denounce FGM practices

1,064,960 medical, social and legal services provided to girls and women

856 CSOs, feminist groups, grassroots organizations engaged in the elimination of FGM

3,174 girls saved from undergoing FGM
THE JOINT PROGRAMME IS GENEROUSLY SUPPORTED BY THE GOVERNMENTS OF,
BELGIUM, CANADA, FRANCE, GERMANY, ICELAND, ITALY, LUXEMBOURG, NORWAY, SPAIN, SWEDEN, THE UNITED KINGDOM, AND THE UNITED STATES OF AMERICA, AS WELL AS THE EUROPEAN UNION (THROUGH THE SPOTLIGHT INITIATIVE AFRICA REGIONAL PROGRAMME)

DELIVERING THE GLOBAL PROMISE TO END FGM BY 2030