



THE
GIRL
GENERATION

TOGETHER TO END FGM

FGM IN THE GAMBIA

COUNTRY BRIEFING

www.thegirlgeneration.org

ABOUT THIS BRIEFING

This country briefing provides up-to-date and easy-to-use facts and figures about FGM in The Gambia.

It aims to support activists, campaigners and grassroots organisations with their advocacy, education and awareness-raising work, as well as giving a quick overview of the facts for journalists and international organisations. It complements existing information about FGM in The Gambia.

This briefing is an outcome of The Girl Generation's desk review and consultation with experts and stakeholders in The Gambia. Analysis and recommendations reflect the views of stakeholders in The Gambia, not of The Girl Generation alone.

WHAT IS FGM?

Female Genital Mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. FGM is a form of violence against women and girls. In 2012, the UN passed a resolution calling for a global ban on FGM.



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ABOUT THE GIRL GENERATION: TOGETHER TO END FGM

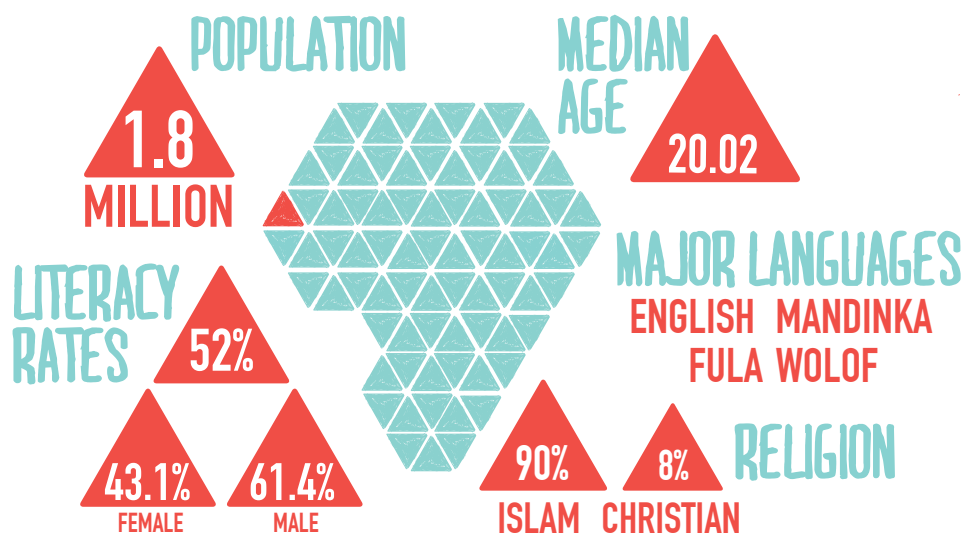
We are a social change communications initiative, providing a global platform for galvanising, catalysing and amplifying the Africa-led movement to end FGM, building on what has already been achieved. We seek to inspire organisations and individuals, including youth, across the most affected countries in Africa and beyond, to end FGM in one generation.



TOGETHER TO END FGM

THE GAMBIA AT A GLANCE

KEY EVENTS IN THE MOVEMENT TO END FGM



First campaigning group on harmful traditional practices, including FGM

1980

Establishment of the National Women's Council/National Women's Bureau (by Act of Parliament), the institutional home for national efforts towards the abandonment of FGM in The Gambia

In collaboration with Department of State for Health (DoSH) the World Health Organisation (WHO) launches The Gambia chapter of its Regional Plan of Action to Accelerate the Elimination of Female Genital Mutilation in Africa

1998

1999

Government lifts decree that originally banned the broadcasting on state radio and TV of any programmes "which either seemingly oppose FGM or tend to portray medical hazards about the practice"

The Gambia ratifies the "Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa" referred to as the "Maputo Protocol". The protocol commits The Gambia to use legislative measures to prohibit and condemn all forms of FGM

2002

2005

Visit to The Gambia by five-person Parliamentary Delegation under Senegambia transborder cooperation against FGM

Ministry of Basic and Secondary Education starts piloting the integration of FGM into school curriculum in three schools. The topic of FGM forms part of the Grade 10-12 pupils' textbook on Population and Family Life Education course

2009

2010

Launch of the UNICEF-UNFPA Joint Programme on FGM/C

Ministry of Health incorporates FGM in the nursing school curriculum

2012

2013

Ministry of Health develops and launches FGM data collection tool in Government medical facilities

The 57th UN Commission on the Status of Women agrees on conclusions including a reference to the need for states to develop policies and programmes to eliminate FGM

UN General Assembly unanimously pass a resolution, calling on countries to accelerate efforts to end FGM

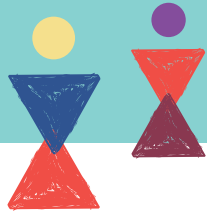
2014

First National Youth Forum on FGM

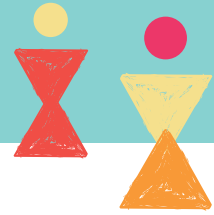
2015

Presidential directive publically bans FGM

Amendment of the Women's Act 2010 by the National Assembly formally bans FGM.



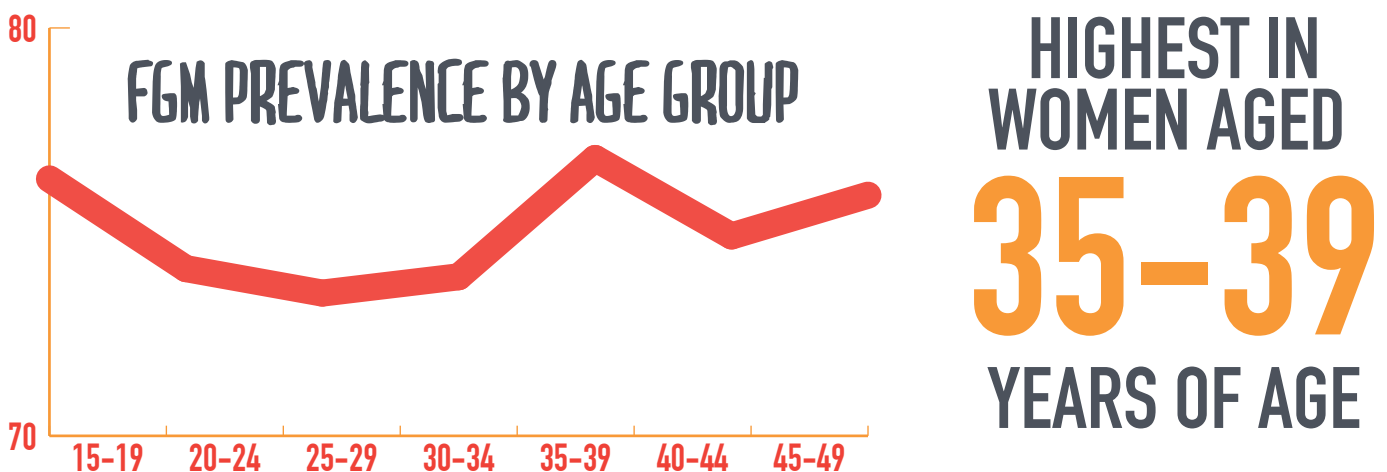
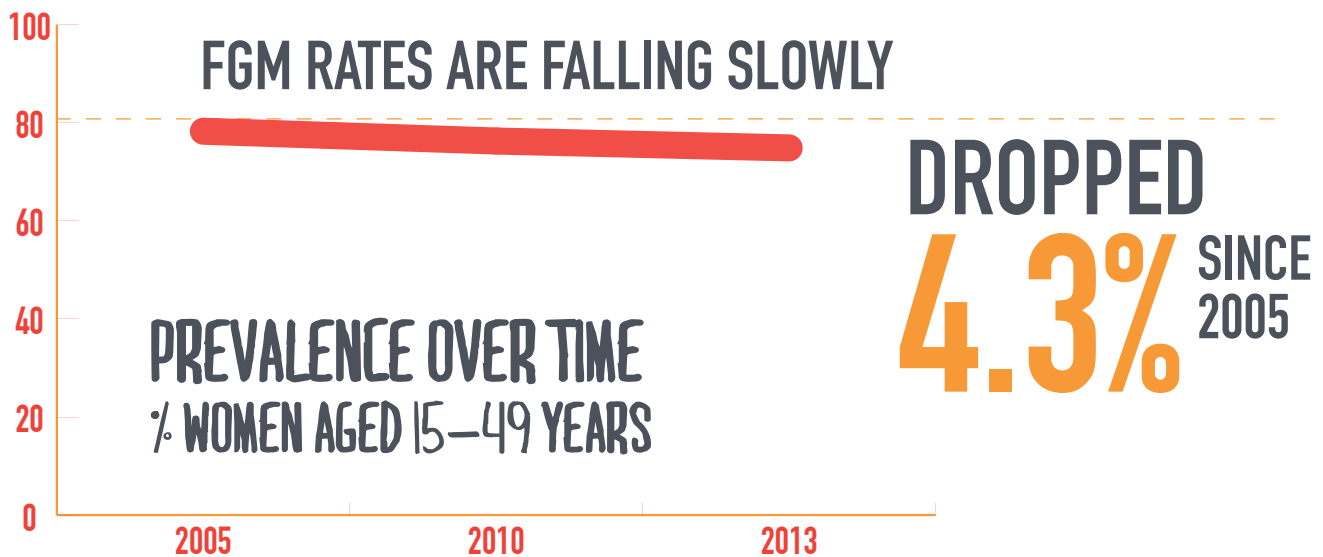
75% OF WOMEN & GIRLS



HAVE UNDERGONE FGM



3 IN 4



PREVALENCE BY LOCATION

79%

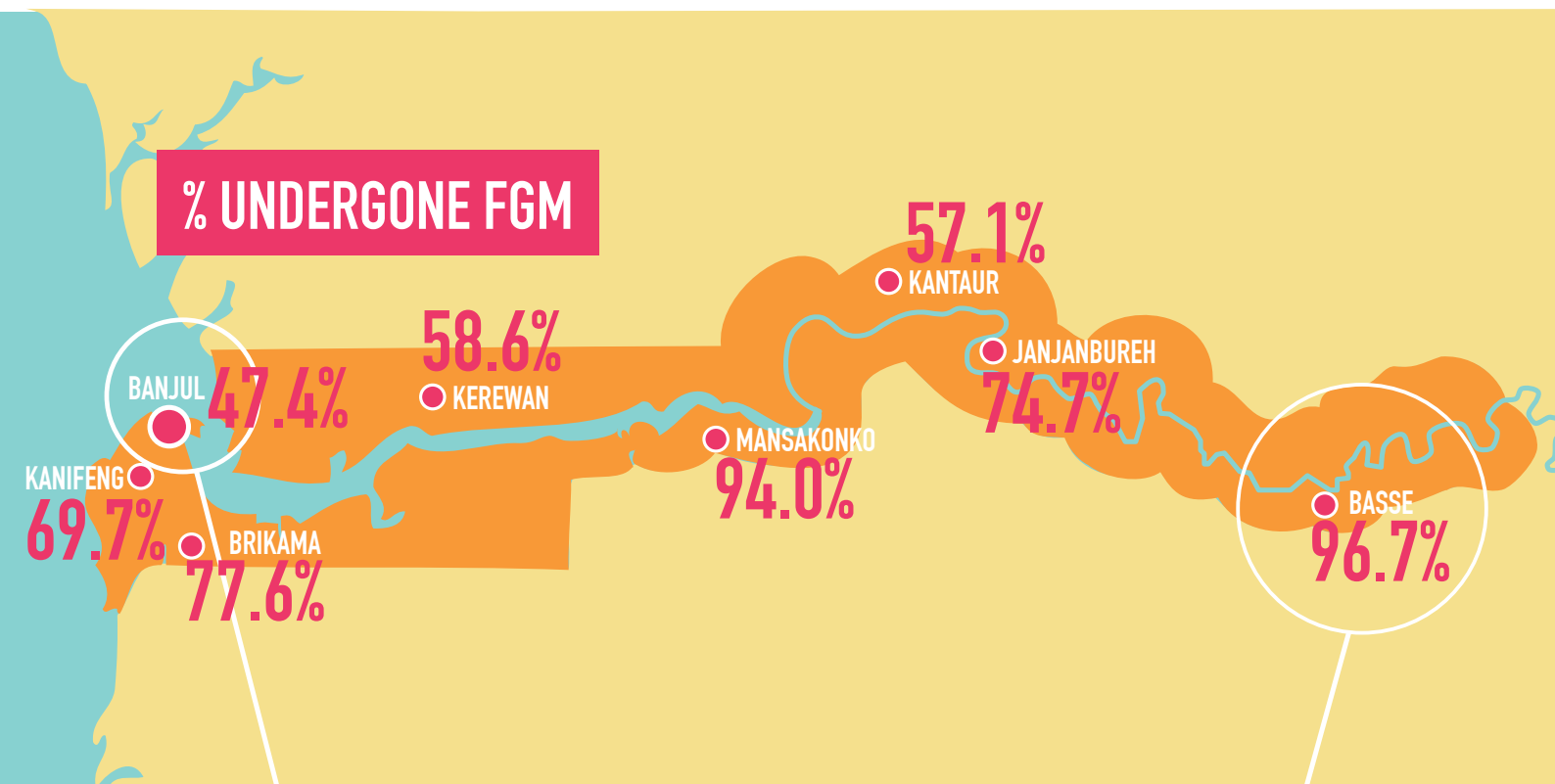
IN RURAL AREAS

FGM RATES VARY
ACROSS THE COUNTRY

72%

IN URBAN AREAS

BY LOCAL GOVERNMENT AREA



FGM RATES

47.4%

LOWEST
IN BANJUL

96.7%

HIGHEST
IN BASSE

WHY FGM IS PERFORMED ON GIRLS

Communities in The Gambia cite a number of different reasons for carrying out FGM.

Across The Gambia, the high prevalence rates of FGM and slow pace at which it is reducing highlight that FGM is strongly held in place by social norms – the invisible rules that govern the behaviour which is acceptable within a community. A variety of drivers uphold the social norms which maintain the practice of FGM – including the following:

RESPECT FOR TRADITION AND ELDERLY

Grandmothers are regarded as the main decision-makers on whether FGM takes place - in authorising the practice they assert their authority, and gain respect of younger women. Upholding these practices and conventions is also very important across The Gambia. Breaking from tradition would set a family outside the norm – and risk their alienation from their community. The infliction of pain experienced in FGM is also believed to generate subordination, instilling acceptance of the social hierarchy under which girls and women are expected to live.



KNOWING THE EYE – RITES OF PASSAGE

FGM is considered an essential element of the rite of passage process in which girls become women. Through this process, girls are indoctrinated into the social hierarchy where she learns respect patterns and rules of interaction which uphold the relationship of girls with their communities. Respect (horomo), secrecy (suturo) and endurance (sabati) are collectively understood as 'knowing the eye' and are closely interlinked – and are taught through the pain of the initiation ritual.



BREAKING FROM TRADITION WOULD SET A FAMILY OUTSIDE THE NORM

HIGH ACCEPTANCE OF GENDER BASED VIOLENCE

Physical punishment is widely considered to be socially acceptable in Gambian society, which also includes wife beating. Ethnic group data shows a positive correlation between women's acceptance of physical violence in the home and higher prevalence of FGM. Enduring pain is also considered a female virtue.



CLEANLINESS AND VIRGINITY

In a culture where cleanliness is highly valued, many believe that FGM improves a women's hygiene. Some people hold the belief that removal of the clitoris controls female sexual desire, thus preserving her purity. Notions of cleanliness around FGM are also linked to the perceived requirements of Islam, with uncut women being seen as unclean, and, as a result, not able to pray.



UNCUT WOMEN ARE SEEN AS UNCLEAN AND NOT ABLE TO PRAY

ETHNIC GROUP DATA SHOWS A POSITIVE CORRELATION BETWEEN WOMEN'S ACCEPTANCE OF PHYSICAL VIOLENCE IN THE HOME AND HIGHER PREVALENCE OF FGM

RELIGION

FGM is understood by many to be an Islamic requirement, although it is also practised by some Christian communities. This perception, however, varies significantly across ethnic groups, and so is not an independent driver in itself.



APPROACHES TO ENDING FGM

Grassroots organisations have been campaigning against FGM for over two decades.

Since the 1980s, the campaign to end FGM in The Gambia has largely been driven by focused grassroots organisations. In recent years the campaign has received increasing attention from wider organisations who work in the area of women's rights, women's reproductive health, health service delivery, legal education, and empowerment efforts through income generation and awareness-raising.

Different organisations have applied different approaches to ending FGM in The Gambia, including:

- ▶ **Community dialogue:** Informing communities and individuals of the health risks and negative consequences associated with FGM. Some approaches use traditional communicators, promoting dialogue among community members, through the development of rhythms and songs about FGM's harmful impacts. Others focus on facilitating inter-generational dialogue based on the principle of listening and questioning between different generations.
- ▶ **Religion-oriented approaches:** Demonstrating the incompatibility of FGM with religion, generating debate as to whether communities should be allowed to continue the practice or be led into abandonment.
- ▶ **Alternative Rites of Passage (ARPs):** ARPs replace the cutting part of a girl's initiation ceremony with alternative rituals, aiming to preserve cultural traditions. Experience has shown that ARPs have greater impact when they are accompanied by education which engages the whole community in collective reflection and leads to changes in the expectations of community members.
- ▶ **Educating traditional excisors and offering alternative income:** This may reduce the practice by supporting individual excisors to abandon their role in the process. However, it does not address the broader social norms which hold the practice in place.
- ▶ **Promotion of girls' education to oppose FGM:** Many groups see education as the most effective long term strategy to end FGM. Programmes include school-based awareness raising sessions helping young people to be more informed about the practice.

SOME APPROACHES USE THE DEVELOPMENT OF RHYTHMS AND SONGS ABOUT THE HARMFUL IMPACT OF FGM

ARPS PRESERVE THE CULTURAL TRADITIONS

NATIONAL LAWS AND POLICIES PROHIBITING FGM

Before December 2015, FGM was not illegal in The Gambia. The government and development partners had then formulated and adopted several policies, plans of action and strategies geared towards the abandonment of FGM in Gambia. The United Nations High Commissioner for Refugees (UNHCR) noted in January 2015 that 'The Gambia was careful about legislating against the practice of female genital mutilation because this would drive the practitioners underground and it had in place a national plan of action against female genital mutilation'. It was also believed that as long

as religious leaders were opposed to ending FGM, the Government would continue to be cautious on the issue.

However, on 24 November 2015, the President of the Republic of the Gambia made a pronouncement banning FGM in the Gambia. This presidential directive was subsequently followed by the submission of a Bill before the National Assembly to amend the Women's Act 2010. The amended Act, now referred to as the Women's (Amendment) Act 2015, bans FGM and imposes stringent punishments for perpetrators.

Laws, Policy instruments and plans of actions include:

- ▶ The Women's (Amendment) Act 2015 prohibits Female circumcision and any form of Female Genital Mutilation and/or cutting
- ▶ National Plan of Action on FGM/C 2013-2017
- ▶ The Children's Act expressly prohibits and eliminates all harmful traditional practices as applicable to children under the age of eighteen
- ▶ National Plan of Action Against Gender Based Violence 2013 – 2017
- ▶ The National Gender and Women Empowerment Policy 2010 – 2020

NATIONAL FRAMEWORK

A number of government institutions have directly or indirectly contributed to the campaign to end FGM in The Gambia.

TANGO.

The Association of Non-Governmental Organizations in the Gambia is the National Umbrella for all NGOs and CSOs in the Gambia.



National Women's Council and Women's Bureau

The main institutions for the implementation of Government gender-related laws and policies. The Bureau is the executive arm of the National Women's Council and is charged with the implementation of policy



decision made by the Council. The two institutions fall under the office of the Vice President of the Republic.

Ministry of Women's Affairs and Gender, the Ministry of Health and the Ministry of Education

Ministries critical in the implementation of policies on FGM. The Ministry of Health and the Ministry of Education for example are leading on the integration of FGM in school teaching curriculums.

UN agencies
UNFPA,



UNICEF and the World Health Organization. The UNICEF-UNFPA Joint Programme on FGM/C is operating in Gambia.

COMMUNICATION ON FGM

Media

In recent years there have been several initiatives to engage the media – in particular, print journalists – in the campaign to end FGM. GAMCOTRAP has sensitised journalists, and in February 2015, The Guardian – in collaboration with UNFPA, Think Young Women, and Safe Hands

THE GAMBIAN RADIO STATION STILL LIMITS BROADCAST EXPLICITLY ADDRESSING FGM

for Girls – launched a Media Campaign to end FGM in

The Gambia. This includes amplifying the work of local activists both nationally and internationally, and training journalists on FGM. In the last couple of years, there has been regular press and online coverage of initiatives to end FGM – which seems to have been re-invigorated by the young campaigners coming to the fore. State-imposed censorship of discussions related to FGM have been lifted, but journalists still operate in a relatively restricted media landscape, particularly on government-owned media.

There are several prominent civil society spokespeople who speak out regularly in

the media, and many of the NGOs working on FGM are effectively engaging journalists to cover their activities. Examples are the ‘Drop the Knife’ ceremonies and workshops for young people, and using traditional media channels like ‘griots’ (traditional communicators) to amplify their messages. A major call from advocates is for the enactment of a national law. Spokespeople from government have not yet prominently supported efforts to end FGM in the media.

There are several young Gambian social media campaigners who take to Twitter and blogging to amplify the campaign and network with the wider end-FGM movement. Local and community-based radio is the primary mass-media means for reaching rural and low literacy populations with multiple different languages.

1.5 MILLION HAVE ACCESS TO MOBILE PHONES, 12% USE THE INTERNET

Mobile phone usage has grown in recent years with 119 mobile phone subscriptions per 100 people in The Gambia (World Factbook). An estimated 14% of the population have access to the internet.

PUBLIC DEBATE, LANGUAGE AND MESSAGING

Currently, language and messaging relating to FGM is largely centred on harm, both by those in favour of, and against, FGM.

Pro-FGM

Many opinion-leading Imams consistently state that FGM should continue. Those who favour the continuation of FGM often accept the rationale that FGM is potentially harmful, but suggest that rather than ending FGM, the harm should be reduced (e.g. by training practitioners in how to conduct ‘less severe’ forms of FGM).

Anti-FGM

Language and messaging tends to focus the harmful health consequences of FGM. The general consensus among those working to end FGM is that hard-line, explicit messaging that condemns communities for practicing FGM is ineffective, and is not received well. Young campaigners are increasingly talking about FGM within the context of violence against women and girls.

EMERGING ISSUES AND TRENDS

EARLIER AGE OF CUTTING AND INCREASE IN CUTTING WITHOUT RITUAL

Several studies on FGM in The Gambia reveal the age at which FGM is performed is reducing, and is more often being conducted on girls aged 0-10. FGM is also increasingly being performed without ritual, suggesting that young girls are not experiencing the collective cultural learning process as it was previously intended. If this is the case, then it is possible that over time FGM will be abandoned for other, less harmful markers of a traditionally-educated girl.

CROSS BORDER

Due to existence of a law banning FGM in Senegal, a report by TOSTAN in 2014 confirmed that some girls have been sent to Gambia, secretly cut and returned to Senegal.

LINKING FGM AND HIV

Some research shows that highlighting the increased risk of contracting HIV amongst women who have undergone FGM has prompted communities to change their practice. As a new health risk to women, the threat of HIV changes the situation, rather than suggests that FGM was wrong in itself.

GAPS AND OPPORTUNITIES

The inclusion of FGM in the Women's Act may deter people from engaging in the practice due to the punishment attached to it, subsequently leading to a reduction in the practice.

However, in the short and medium term the Act assists in breaking the culture of silence around FGM by raising awareness of the issue, and showing full government support for ending the practice. Importantly, it also punishes accomplices - those that incite or promote the practice as well as those that know that the practice is about to take place and fail to inform the relevant authorities. This means there is significantly greater protection for women and girls at risk of FGM.

PUBLIC DECLARATIONS

Publicising public declarations made by communities in different parts of The Gambia can help to counter the argument that FGM is a valuable cultural practice still desired by Gambians.

COMMUNITY AND RELIGIOUS DIALOGUES

Creating media platforms for community and religious dialogue on the position of FGM in culture and religion.

INCREASING YOUTH ACTIVISM

Youth networks are increasingly speaking out on the issue of FGM, showing a new generation committed to ending FGM.

ALTERNATIVE RITES OF PASSAGE

Supporting community efforts to organise and publicise Alternative Rites of Passage.



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REFERENCES

Sources for FGM prevalence data: 'UNFPA FGM Dashboard, The Gambia http://www.devinfolive.info/dashboard/unfpa_fgmc/dashboard.php [accessed 27 August 2015]' and 'The Gambia Bureau of Statistics (GBOS) and ICF International. (September 2014) The Gambia Demographic and Health Survey 2013. GBOS and ICF International: Banjul, The Gambia, and Rockville, Maryland, USA.' Additional information from '28 Too Many. (March 2015) Country Profile: FGM in The Gambia. 28 Too Many: London, UK'

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DEVELOPED JANUARY 2016

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