



Accelerating the Abandonment of Female Genital Cutting: Community Change to Support Human Rights

- *View FGC in terms of gender, human rights, and child protection.*
- *Address FGC holistically, within a community development strategy, using culturally sensitive and non-judgmental approaches.*
- *Engage a wide range of participants and stakeholders.*
- *Improve the infrastructure and support for women's health care.*

Female genital cutting (FGC), also called female genital mutilation or female circumcision, is the removal of part or all of the external female genital tissue. This traditional practice affects an estimated 130 million girls and women, mainly in Africa. FGC is a harmful practice that violates international standards for girls' and women's rights and often leads to serious health problems (WHO 2000, UNICEF 2005). Yet it is justified in many communities by a wide variety of cultural norms and beliefs.

Community-based approaches to accelerating abandonment of FGC have the best chance of achieving sustainable change. While approaches based on restrictive laws or the health consequences of FGC send important policy messages, they may have limited impact unless they also address the cultural underpinnings and specific context of the practice and determine the community's level of support or opposition toward the practice.

Evidence supporting community-based approaches¹

Community education. In Senegal, a broad-based community empowerment program, Tostan, provided educational modules on hygiene, democracy and human rights, literacy, women's health (including FGC), and problem solving. The program encouraged broad community-based diffusion of the message. Evaluation showed that knowledge of women's rights to health and education became nearly universal among participants, while support for FGC decreased. Representatives of 300 villages declared their intention to stop FGC. Following the program's replication in Burkina Faso, a similar declaration involved 30 villages. This approach is being adapted in The Gambia and several other African countries (Diop et al. 2004; www.tostan.org).

Community development. In Egypt, a village-level project supported a variety of community development activities aimed at empowering communities and individuals in many aspects of life—education, health, income generation, agriculture, and environmental protection. This holistic approach changed attitudes toward FGC and, in one of the villages, resulted in almost total abandonment of the practice (Abdel-Tawab and Hegazi 2001).

Community members as change agents. In Egypt, influential community members, or parents or girls who refuse circumcision (known as "positive deviants"), received training to advocate against FGC in their communities. This approach has been tested alone or in combination with other community projects such as literacy training. The positive deviance approach has been expanded to 42 Egyptian communities where it is increasing public debate on this previously taboo topic, as well as on other issues such as gender, nutrition, and health (CEDPA 2005).

Alternative puberty rites. Where FGC is part of initiation ceremonies, developing socially acceptable alternatives to cutting can allow girls to celebrate their entry into adulthood without violating their right to safe and healthy sexuality. In Kenya, an alternative coming-of-age ritual featured a public ceremony and girls' education instead of circumcision. This alternative rite provided social support for families that were considering abandoning the practice so that they could make the decision without fear of community disapproval (Chege, Askew, and Liku 2001).



Adding FGC to existing interventions. In Kenya and Ethiopia, the addition of FGC advocacy to existing reproductive or primary health interventions enhanced communities' knowledge about the effects of FGC and increased public debate on the issue. The interventions described FGC as a human rights issue with health, social, and psychosexual effects. Awareness of the complications of cutting increased in Kenya; and in Ethiopia, local leaders of 70 villages made public declarations that girls in their villages would no longer be cut (Chege et al. 2004).

Program implications

Approach FGC within a development context. Successful strategies for encouraging the abandonment of FGC have addressed cutting as part of a broad development context, such as education, community development, or human rights, rather than as a separate issue.

Fit the intervention to the context. Interventions to end FGC must be tailored to target the community's rationale for circumcision and degree of readiness to question and address the issue. Where questioning of FGC is already underway, assertive advocacy strategies may add momentum to ongoing social change. Where communities strongly support the practice, the most effective approach may be to initiate a dialogue on FGC.

Seek respected local partners. Some communities may view anti-FGC activities as attempts by outsiders to destroy their culture. Working with locally respected organizations and individuals can ensure that change comes from within and does not challenge the culture as a whole.

Ensure systematic communication of changes among adjacent communities. Diffusion of community changes—through mass media, outreach, and the communities themselves—is essential to sustain changes in attitudes and behavior. Counteracting pressures to continue FGC calls for significant changes in social norms that generate strong community support and advocacy for abandoning the harmful practice.

Link national human rights and health legislation to local change. Regional and national policies can support the rights of women and girls by integrating abandonment of FGC within strategic development goals. Where FGC is entrenched, policymakers should seek to improve health care services for safe motherhood, including management of complications from FGC.

Set goals and evaluate results. Given continuing restraints in health care financing, it is vital to determine the goals of anti-FGC interventions, set benchmarks for success, and evaluate findings rigorously—and to share the results.

¹ For more information about these programs, please see the related program final reports at: http://www.popcouncil.org/frontiers/projects_pubs/topics/fgc/fgc_afRI.html

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Where to get more information: www.maqweb.org

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