



## **PREVENTION OF FGM/C THROUGH THE HEALTH SECTOR IN THE GAMBIA AND SPAIN**

### ***Contribution for the OHCHR Report of Good Practices and Major Challenges in Preventing and Eliminating Female Genital Mutilation***

**Wassu-UAB Foundation** is a scientific organization of international scope, initiated in 1987, working for the management and prevention of Female Genital Mutilation/Cutting (FGM/C) through anthropological and medical research, applied to knowledge transfer. The organization focuses on working with the health sector in both the origin and the diaspora as a mean to improve the services for women's and girls' living with FGM/C and who are at risk of FGM/C, and to contribute to the abandonment of the practice.

Wassu-UAB Foundation hosts the Transnational Observatory of Applied Research to New Strategies for the Prevention of Female Genital Mutilation/Cutting, under the Chair of Knowledge Transfer, at the Department of Social and Cultural Anthropology, of the Autonomous University of Barcelona (UAB). The *Transnational Observatory* is integrated by two research and training centres: in Spain, the *Interdisciplinary Research Group for the Prevention and Study of Harmful Traditional Practices* (IRGPS/HTP) of the Dpt. of Social and Cultural Anthropology of the Autonomous University of Barcelona, and in The Gambia, the Non-Governmental Organization (NGO) *Wassu Gambia Kafo*.

The aim of the Observatory is the development of a comprehensive methodology, culturally respectful, evidence based and results oriented, to prevent FGM/C and contribute to the well-being of girls and women experiencing its consequences. The result is an innovative and sustainable response to traditional methods, based on ownership, institutional strengthening and sectorial concentration, aligned with local policies and strategic international plans.

The base of this innovative approach is applied research, which allows a better understanding of the practice, its characteristics and contexts, such as its prevalence, socio-cultural aspects, socio-demographic features and consequences directly related to the proceeding. These findings led to prioritize the strategy conducted towards the prevention of FGM/C, which, in line with the recommendations of the World Health Organization (WHO), focuses on three areas: advocacy, building evidence and providing guidance.

Once the knowledge is gathered in the field through applied research, it is transferred in cascade to key social agents such as policy makers, health, social services and education professionals, health sciences students, community and religious leaders, Traditional Birth Attendants, and excisers, for them to be the ones transferring it to the society.

## The Gambia

In the Gambia, *Wassu Gambia Kafo* (WGK), a local NGO funded in 1999, is the research and training centre to provide guidance and advocacy straight in the field, sharing generated knowledge among all the stakeholders involved in the issue of FGM/C.

According to a clinical research conducted by the organization in 2011<sup>1</sup>, the prevalence of patients with different types of FGM/C in The Gambia was: type I, 66.2%; type II, 26.3%; and type III, 7.5%. Complications due to FGM/C were found in 34.3% of the patients. A second study<sup>2</sup> proved that women with FGM/C had a significantly higher prevalence of long-term health problems, as well as higher probability of suffering complications during delivery and problems associated with anomalous healing after FGM/C. Similarly, newborns were found to be more likely to suffer negative consequences such as fetal distress and caput of the fetal head. It is important to emphasize that these two clinical researches are the only study conducted on FGM/C in the country and were requested by the Vice-President with the collaboration of the Cuban Medical Mission in The Gambia.

Another research<sup>3</sup> conducted by Wassu showed that a significant proportion of Gambian health professional working in rural areas embraced the continuation of FGM/C (42.5%), intended to subject their own daughters to it (47.2%), and reported having already performed it during their medical practice (7.6%). Women showed less approval for continuation of FGM/C and higher endorsement of the proposed strategies to prevent it than men. Nevertheless, it was among ethnic groups that differences were more substantial, suggesting that ethnicity prevails over professional identity.

A further study<sup>4</sup> confirmed that ethnic identity, more than religion, is the decisive shaping factor on how men conceive and value FGM/C. This study also shows that a substantial proportion of men intend to have it performed on their daughters, although reporting a low involvement in the decision making process, with very few taking alone the final decision. Only a minority is aware of FGM/C health consequences, but those who understand its negative impact on the health and well-being of girls and women are quite willing to play a role in its prevention.

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<sup>1</sup> KAPLAN, A.; HECHAVARRIA, S.; MARTIN, M.; BONHOURE, I. (2011) *Health consequences of female genital mutilation/cutting in the Gambia, evidence into action*, in *Reproductive Health Journal*, 8:26.

<sup>2</sup> KAPLAN, A; FORBES, M; BONHOURE, I; UTZET; M; MARTÍN M; MANNEH, M; CEESAY, H. (2013a) *Female Genital Mutilation/Cutting (FGM) in The Gambia: long-term health consequences and complications during delivery and for the newborn*, in *International Journal of Women's Health*, 5 (323:331)

<sup>3</sup> KAPLAN, A; HECHAVARRÍA, S; BERNAL, M; BONHOURE, I. (2013) *Knowledge, attitudes and practices regarding FGM among rural Gambian health care professionals: a transcultural study*, in *BMC Public Health*, 13: 851.

<sup>4</sup> KAPLAN, A.; CHAM, B.; NJIE, L.; SEIXAS, A.; BLANCO, S.; UTZET, M. (2013b). *Female Genital Mutilation/Cutting: The Secret World of Women as Seen by Men*, in *Obstetrics and Gynecology International*, vol. 2013, Article ID 643780.

In this context, a MoU was signed in 2010 with the Ministry of Health and Social Welfare, UN agencies and Wassu Foundation to develop and implement a National Training Program on FGM/C for health professionals countrywide in The Gambia.

For the purpose of transferring knowledge, trainings of health professionals, students of medicine, nursery and midwifery, and Traditional Birth Attendants have been conducting by experienced local trainers of WGK since 2010, transferring education and advocacy in the prevention of FGM/C and the management of its consequences. For supporting the trainings, a 10 modules manual<sup>5</sup> has been developed, which has also been integrated in the academic curriculum of all health sciences in the country. Furthermore, being conscious of the complexity of such a rooted practice among the Gambian society, WGK is conducting sensitizations to key stakeholders (policy makers, religious and community leaders, excisers).

Nowadays, WGK has trained over 3600 stakeholders, including health professionals, students of medicine, nursery and midwifery, and traditional birth attendants. In conducting trainings, WGK pays special attention to the topics which are more likely problematic through a culturally respectful approach. These are general aspects concerned to FGM/C, consequences related to the practice, myths and misconceptions to be broken with evidence. In addition, there is an innovative final module on advocacy, which stimulates the interest of the trainees, who often demand more strategies to play a key role towards the prevention of FGM/C among their communities.

Outcomes are starting to arise, as social changes are slow. There is still work to be done, in order to reach all the health professionals, sensitize all grassroots stakeholders and monitor: evaluate the impact, view new tendencies, etc. By this time, the debate is being fostered, government is committed with its ending, health professionals and agents are starting to be aware of its implications, consequences and demand more support to work on the prevention of FGM/C in the communities.

## Spain

Wassu-UAB Foundation's methodology crosses continents, acknowledging that FGM/C is not only a local issue but has become a global problem, as it is part of the cultural background of migrants who perpetuate it in the diaspora. The strategy builds on synergies between origin and destination countries.

In 2001, Prof. Kaplan and her team published the first socio-demographic map of FGM/C in Spain<sup>6</sup>. This unique map, based on data from local Census, displays the population coming from the countries where FGM/C is practiced and its distribution in the Spanish territory. Regularly updated every four years

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<sup>5</sup> [http://www.mgf.uab.es/eng/resources\\_for\\_professionals.html](http://www.mgf.uab.es/eng/resources_for_professionals.html)

<sup>6</sup> KAPLAN, A.; MERINO, M. y FRANCH, M. (2002) *Construyendo un Mapa de las Mutilaciones Genitales Femeninas*. IDIL, Barcelona.

(2005, 2009, 2013)<sup>7</sup>, and performing a film of the phenomenon, this map displays the number of women and girls who have undergone the practice, the types, the number of girls at risk of undergoing the practice or be suffering its complications, and where they are located in Spain. This is an essential tool to know the magnitude and geography of FGM/C in Spain, allowing the design and coordination of preventive and care interventions at a primary level (health, social work and education), contributing to help policy makers in the developing of policies on the issue.

In 2003, the *Interdisciplinary Research Group for the Prevention and Study of Harmful Traditional Practices* (IRGPS-HTP) of the Dept. of Social and Cultural Anthropology at the Autonomous University of Barcelona is established, bringing together trainers and researchers from different fields (pediatrics, family medicine, obstetrics, nursing, anthropology, demography, law, education and social work). Applied research is undergone among migrant families and primary care professionals to gather knowledge about the practice in the diaspora<sup>8</sup>. Training tools are also designed following the research results to ensure an adequate training for key agents in the prevention and management of the practice. Their aim is to ensure that migrant families are sensitized and supported by qualified professionals who work towards the care and prevention of FGM/C.

A study<sup>9</sup> conducted between 2001 and 2004 among primary care professionals in the Spanish region of Catalonia about their knowledge, attitudes and practices towards FGM/C informed that less than 40% correctly identified the typology of FGM/C, while less than 30% knew the countries in which the practice is carried out and 82% normally attended patients coming from these countries. As a result, IRGPS-HTP provides training to primary care professionals throughout the country for the prevention and care of FGM/C. A Manual for Health Professionals and prevention tools has been developed for this purpose<sup>10</sup>.

Wassu-UAB Foundation has MoUs signed with different Spanish councils and governmental organizations involved in the prevention of FGM/C. The purpose is to train primary care professionals and implement coordinated preventive strategies in order to ensure an adequate action in the prevention of the practice and the care of its health complications for girls and women. A pilot strategy has been developed and evaluated with success in Badalona (Catalonia). The training of primary care professionals and the implementation of a coordinated preventive strategy to tackle the practice has proven success: 100% of the girls travelling to their families' countries came back. This model is currently being implemented in other cities and regions in Spain.

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<sup>7</sup> KAPLAN, A. y LÓPEZ, A. (2013) *Mapa de la Mutilación Genital Femenina en España 2012* Antropología Aplicada 2. Servei de Publicacions Universitat Autònoma de Barcelona, Bellaterra, en prensa.

<sup>8</sup> KAPLAN, A.; FERNÁNDEZ, N.; MORENO, J. et al. (2010) "*Female Genital Mutilation: perceptions of healthcare professionals and the perspective of the migrant families*", in BMC Public Health No10: BioMed Central pp. 193

<sup>9</sup> KAPLAN, A.; TORAN, P.; MORENO, J.; et al (2009) "*Perception of primary health professionals about Female Genital Mutilation: from healthcare to intercultural competence*", in BMC Health Services Research, No9: BioMed Central. pp. 11.

<sup>10</sup> [http://www.mgf.uab.es/eng/resources\\_for\\_professionals.html](http://www.mgf.uab.es/eng/resources_for_professionals.html)

Wassu-UAB Foundation research and practice has proven that training for primary care professionals is crucial to ensure an adequate prevention and sensitization of the health consequences of FGM/C to migrant families. As legitimate health agents in contact with the families, they can build the confidence needed to tackle this sensitive issue and inform about the consequences for their daughters in a culturally respectful manner. When appropriate preventive approaches take place, there is no need of police enforcement. The transfer of knowledge empowers the families with information to decide about their future, and that has an effect in their home countries when they travel, becoming multipliers of the information among their relatives.

### **Exporting the methodology to Kenya and Tanzania**

Due to the positive impact of this circular, longitudinal and culturally respective approach in The Gambia and in Spain, in 2012 the Wassu-UAB Foundation signed MoU with Moi University in Kenya, and with Kilimanjaro Christian Medical University College (KCMUCo), Muhimbili University of Health and Allied Sciences (MUHAS) and University of Dodoma (UDOM) in Tanzania to establish a consortium to replicate the methodology in both countries.

The manual for health professionals has been adapted to the local realities and two new versions have been printed for Kenya and Tanzania. In 2015, the exportation of the methodology will continue with trainings of local trainers, promoting a Training Program on FGM/C for students of medicine and nursery of the four universities.

### **Challenges and way forward**

After working over 30 years on prevention of FGM/C, there are still challenges to be addressed. The approach suggested by field experience is to develop and improve the following key issues:

- Strengthen response. Continue increasing knowledge among health agents through applied research and trainings.
- Expand in efficient, effective and sustainable way.
- Measure the impact through monitoring and evaluation, and develop an epidemiological surveillance system.
- Shape debates at national and international level: Visibilize the model and foster debate to harmonize prevention policies.
- Conduct and publish applied research.
- Optimize performance. Reach a stability of funding resources and improvement of coordination between partners.

For more information: <http://www.mgf.uab.es/eng/index.html>