

**Towards the abandonment of female genital cutting in communities in
Abia State: initiatives in Nigeria**

By

E.E. Enwereji

College of medicine, Abia State University, Uturu, Nigeria

Abstract

Aims:

The aims of this paper include: to find out the extent to which individuals especially men are disposed to support abandonment of female genital mutilation or genital cutting (FGM or FGC) in Abia State of Nigeria despite its attendant risks. To note the extent to which individuals in the communities are aware of the medical and social effects of FGC. To institute planned and coordinated activities to discourage FGM practice in rural areas. The question is to what extent do community members regard FGM as a harmful practice as to discourage its practice? The fact is that FGM is a highly sensitive issue in rural areas, and activities to discourage its practice should be very carefully planned to prevent negative outcomes like violence, quarrelling and others. Therefore, the researcher sought the cooperation of the entire community during the research. This helped to create enabling environment which assisted the researcher to obtain information during the study.

Data and methods:

A round table discussion with 24 respondents comprising 4 opinion leaders, 4 Religious Leaders, 4 Traditional Birth Attendants (TBAs), 4 Nurses/ Midwives and 8 women leaders was conducted. Discussions centered on reasons for performing FGM, its benefits, risk factors, better practices to influence its abandonment and noting why FGM practice continues in the society. After the discussion, community mobilization approaches were used to sensitize community members on the risks of FGM. Also information on the extent to which men and women support the idea of discouraging FGC was collected. Data were analysed qualitatively. Awareness of at least two medical or social effects of FGC in communities was emphasized.

Results:

There was generally poor knowledge of the effects of FGC on females especially among those with lower and/or no formal education as only a limited number of individuals could hardly mention two effects of FGC on females. The common effects mentioned were prolonged labour, Caesarian session, frigidity, and dysmenorrhea. Only very few mentioned maternal death, intimate partner violence, and higher hospital bills occasioned by prolonged hospital stay after child birth. Those who had knowledge of harmful effects of FGM lacked the courage to support its discouragement for fear of being accused of encouraging adolescents' promiscuous sex life. Generally, there was strong belief especially among men that FGC should not be discontinued for the simple reason that its practice helps

to curb excessive sexual drive among females thereby prevent a good number of them from engaging in prostitution..

The workshops organized for Religious Leaders, health workers and others arrived at conducting periodic health education, health talks, and counseling services on hazards of FGC for individuals during community meetings, church programmes, antenatal, post-natal, and child welfare clinics.

Conclusion:

Findings reveal poor knowledge of health and social effects of FGC. Therefore periodic training to establish peer-to-peer education for women is recommended.