

FEMALE GENITAL MUTILATION (FGM)

The Government of the United Republic of Tanzania criminalized female genital mutilation (FGM) in 1998. Since then, the prevalence of FGM has decreased from 18 per cent to 10 per cent. Progress towards ending FGM in Tanzania is evident: Increasing numbers of girls are attending alternative rites of passage and more cases are being reported and successfully handled by the police as a result of awareness-raising and systematic training of law enforcement officers on FGM response and gender-based violence more broadly.

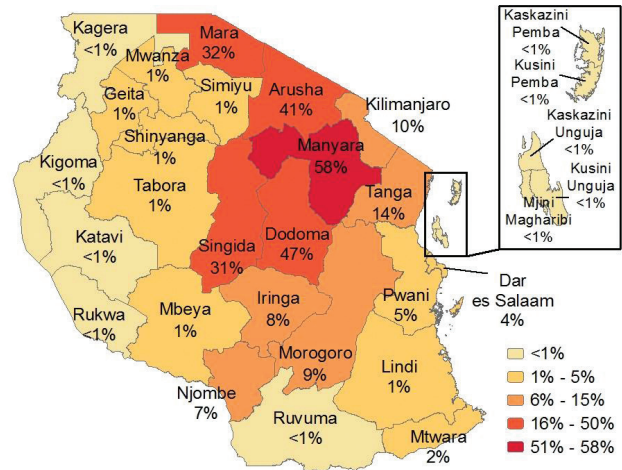
One in ten women in Tanzania (aged 15-49) has undergone FGM. Of these, 35 per cent underwent FGM before the age of one.

The continued practice of FGM in Tanzania, however, has been highlighted as an area of concern by human rights treaties to which Tanzania is a signatory. The harmful practice is still common in some communities and of concern is that it is increasingly practised on girls under the age of one.

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Substantial regional disparities exist in the prevalence of FGM: The highest prevalences are found in Manyara, Dodoma and Arusha Regions at 58 per cent, 47 per cent, and 41 per cent, respectively. Likewise, FGM prevalence is twice as high in rural (13 per cent) than in urban areas (5 per cent).

June 2018 global data from UNFPA shows that population growth is jeopardizing progress made to date as the real number of girls at risk is growing. Overall the observed reductions in FGM are not sufficient to offset the expected population growth.

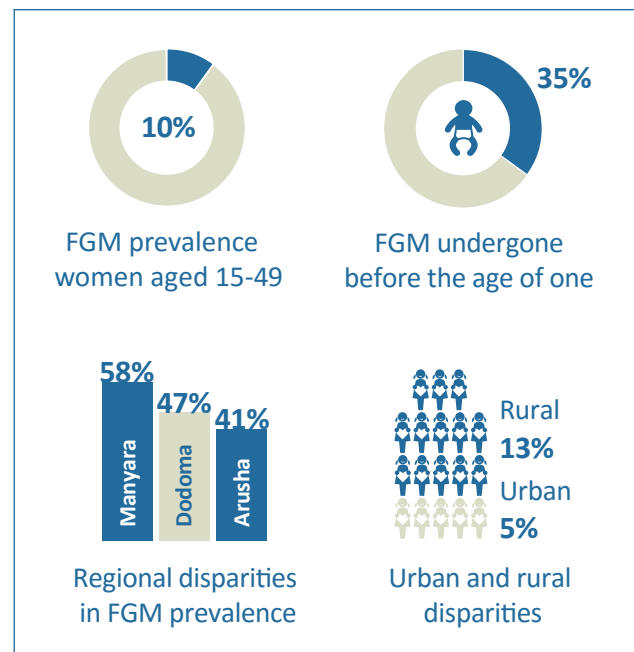


Prevalence of FGM by region¹

The designations employed and the presentation of material on this map do not imply the expression of any opinion whatsoever on the part of the United Nations concerning the legal status of any country, territory, city or area or its authorities, or concerning the delimitation of its frontiers or boundaries.

DRIVERS OF FGM

The practice of FGM is rooted in social norms, cultural beliefs and economic incentives. FGM appears to be used as a means to control women's sexuality and, in many communities, is considered as an important rite of passage into womanhood. Many harmful myths about FGM have been repeated so often that they are believed to be fact.



¹ Tanzania Demographic and Health Survey and Malaria Indicator Survey (TDHS-MS) 2015-2016.

CONSEQUENCES OF FGM

FGM compromises the natural functions of the female body and has a detrimental impact on the health of women and girls, including their psychological, sexual and reproductive health.

Short-term consequences:

- Death from haemorrhaging and severe pain
- Trauma and infections that may result from the procedure

Long-term consequences

- Chronic pain
- Infections – including recurrent urinary tract infections
- Decreased sexual enjoyment
- Psychological consequences, such as post-traumatic stress disorder
- Increased risks of birth by caesarean section
- Increased maternal mortality
- Increased risks of neonatal deaths
- Increased risks of still births
- Postpartum haemorrhaging
- Low birth weight in infants

THE NATIONAL RESPONSE TO FGM

The National Plan of Action to end Violence against Women and Children (NPA-VAWC) 2017/2018-2021/2022 specifically addresses FGM as a traditional practice that harms women and children. Tanzania is committed to ending violence against women and children in all its forms, including FGM, by 2030 within the framework of the 2030 Agenda on Sustainable Development.

A multi-sectoral response is essential to eliminate FGM. Legal sector actors should be trained to ensure that legislation prohibiting FGM is enforced; alternative rites of passage should be offered to communities; programmes should consider that various groups, including FGM practitioners, make a living out of the practice and the related festivities; safe spaces need to be established for girls at risk; and health sector interventions should integrate FGM prevention and response services.

SUCCESS STORIES FROM THE FIELD

Mitigating the effects of and preventing FGM through training and awareness

The European Union supports Plan International in their work with the Children's Dignity Forum (CDF), the New Light Children Center Organization (NELICO), and local communities to mitigate the effects of and to end FGM in Mara and Geita Regions. Eliza and couple Jackson and Sabayi are some of the faces in the fight to eradicate FGM in the Mara Region. Eliza experienced genital mutilation at the age of 14 and was married as a third wife to a 32-year-old man when she turned 16. She experienced complications during childbirth and beatings at home. Eliza managed to escape with her child and received entrepreneurial training at one of CDF's centres, giving her the skills to support herself and her child. Plan International and its partners empower survivors to break the cycle of FGM and to advocate for their daughters and siblings not to be cut.

After Jackson learnt of the effects of FGM, he decided to marry the girl he loved irrespective of whether she was cut or not. He married Sabayi at the age of 23 and together they have decided that no child of theirs will undergo mutilation. When men, especially young men and boys, are informed about the health implications of FGM, they often become agents of change and support its elimination. Plan International, CDF and NELICO use different platforms, including football clubs, to inform and empower boys and girls to fight against FGM.



Provision of alternative rites of passage as part of comprehensive programming to end FGM

Masanga Centre, together with Terminate FGM's (TFGM) network of hundreds of volunteers in Tarime District, provide a month-long training on human rights, reproductive health and the culture of their Kurya community, as well as extra tutoring in school subjects. The training is followed by a graduation ceremony. The whole process is a rite of passage that serves as an alternative to FGM for girls in the community. Since 2007, over 2,000 girls have attended the camp. The training aims to protect girls from FGM, child marriage and adolescent pregnancy, and to keep them in school. UNFPA provides support to increase the number of girls that can take part in this programme, and to ensure the availability of psychosocial support for girls and their parents. This is part of a comprehensive programme supported by UNFPA, that includes building the capacity of the media, police, judiciary, teachers, and traditional elders in FGM prevention and response.