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**Subjects: People** 

## Huge fall in prevalence of FGM/genital cutting among girls across Africa

But still pervasive in Iraq and Yemen; and conditions ripe for reversal of downward trend

The prevalence of female genital mutilation/cutting among girls up to the age of 14 has fallen sharply in most regions of Africa over the past three decades, reveals the first analysis of its kind, published in the online journal *BMJ Global Health*.

But the rates of decline vary widely by country, and the practice is still pervasive in Western Asia–Iraq and Yemen–the findings indicate.

What's more, the conditions in many of the countries where a decline has occurred are ripe for a reversal of the downwards trend, warn the study authors.

They base their findings on an analysis of survey data (Demographic Health Survey and Multiple Indicator Cluster Survey) from 1990 up to 2017 for 29 countries across Africa, plus two countries in Western Asia (Iraq and Yemen).

In all, they included 90 sets of survey data, covering 208,195 girls up to the age of 14, for a time trends analysis.

This showed that the prevalence of FGM/cutting varied widely among and within countries and regions during the survey periods. The decline was steepest in East Africa, followed by North and West Africa.

Prevalence fell from 71.4 per cent in 1995 to 8 per cent in 2016 in East Africa; from just under 58 per cent in 1990 to just over 14 per cent in 2015 in North Africa; and from 73.6 per cent in 1996 to 25.4 per cent in 2017 in West Africa.

However, in Western Asia, FGM/cutting prevalence has gone up, rising by 1 per cent in 1997, and by just under 16 per cent in 2013.

While these trends point to the overall success of national and international initiatives to drive down the practice over the past three decades, there is still significant cause for concern, note the authors.

"The risk factors still prevail, which potentially heightens the likelihood of reverse trend in some countries," they point out. "These risk factors include lack of, or poor, education, poverty, gendered cultural forces....and continued perception of FGM/cutting as a potential marriage market activity."

This study is observational, and as such, no firm conclusions can be drawn about its findings, added to which the survey data relied on personal contributions often affected by illiteracy, poverty, and cultural sensitivities.

Nevertheless, many countries were included in the analysis and sound sampling methods were used for the surveys say the authors.

The emerging consensus is that more than 3 million children in Africa are at risk every year of FGM/cutting, they write.

And the practice is not confined to Africa and the Middle East, but also occurs in India, Indonesia, Israel, Malaysia, Thailand, some European countries, as well as North and South America.

"If the goal of public policy is to ensure that the practice is eliminated, further efforts and interventions as well as service planning are urgently needed," they conclude.

This means legislation, advocacy, education, multimedia communication and forging partnerships with religious and community leaders and health workers, they say.