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# **FGM in Ghana: A note to The Ministry of Gender, Child and Social Protection**

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Modern Ghana (19.02.2019) - <https://bit.ly/2V86ptZ> - We cannot expect to get into the way of continuous development while we are following a system of education which depends on the borrowing of an alien physiology, psychology and sociology, a system of education which is based on eschewing by us of the social institutions of our ancestors on the ground merely that our ancestors were uncivilized for just as a condition of health in the individual is health in the society in which he is born, so a condition of self-respect in the individual is reverence for the institutions of his social grouping," Kobina Sekyi (1892-1956), a Gold Coast freedom fighter and a Nationalist and author of 'The Blinkards.'

I was recently thrown into a state of total shock when one of Ghana Broadcasting Corporation's local fm stations over the weekend reported news on increasing Female Genital Mutilation (FGM) practices in Pusiga, Northern Ghana.

I was sorely worried about the conversation and I sought to augment the volume of the radio as the only affront to assimilate very well, news report on how mothers are productively crossing borders to have their females/daughters engaged in FGM in Togo and other neighboring towns. The listeners/audience to this reportage were also informed on notable arrests of some culprits who were claimed to have been released according to the reportage. I grapple to remain mute and not to pen down points on this issue because every discourse on womanhood fettered anywhere in the world is a gross concern for womanhood. Thankfully, the minister is a woman –my thoughts are that it will be imperative to have this dialogue on a two-tiered level. First on a 'sister-to-sister' level and secondly on a professional level.

At the brink of Ghana's 60th anniversary, Kwame Nkrumah and Kwegyir Aggrey should be turning in their graves to lend ears to such sour practices such as FGM in Ghana.

As a gender researcher navigating trends on women's health in Ghana and gender issues across context these are my suggestions to the ministry:

In accordance to the Sustainable Development Goals (2030), the UN posits action-oriented means to address crippling social needs in areas such as social and environmental protection, health, education, climate change etc. In a related news item on September 28 on ghanaweb (2018), we are reliably informed on 'government to pass social protection law in 2019'. It will be imperative to provide Ghanaians with progress on the law. It is important to stress that the Social Protection law may hold one of the indispensable tools to the FGM menace. A social protection law is relevant now- indeed to protect rights of these 'innocent' girls who somewhat thorn between traditions and norms

of their local enclaves and 'playing the good subject role' to 'ignorant parents' may secure a pathway to this endangering act geared at ripping the dignity of womanhood. The law should be implemented now because WHO reports have shown that beyond poverty which is one of the underlining facilitator of such acts (which has been mediated by social intervention policies such as Livelihood Empowerment Against Poverty (LEAP) , free Senior High School, the school feeding program; unfortunately, more scientific diplomacy may be essential here- the introduction of more rigorous behavioural change models to sustain a positive behavioural intervention for FGM.

This is not to 'down play' the enormity of task at hand-it may be a herculean one, as reported of how the Director of the Gender ministry facilitated the arrest of the culprits. A caution reminder here that an individual-centred approach may be overly superficial in addressing the menace.

Beyond major stakeholders' invitation to provide inputs to the law, gender-based researchers and psychologists are to be included in the design and development of culturally-sensitive behavioural modification paradigms for piloting and further scientific investigations among the target population.

The acknowledgement of Knowledge transition systems in Africa (for that matter Pusiga). In order to obtain SDG (3) which focuses on good health and well-being and SDG Goal one on 'no poverty', there is an inherent need to acknowledge the indigenize methods of knowledge transitions within the specific context of Pusiga. We talk about gaps between research work implementation and evaluation, when we begin to open a national dialogue on useful ways to end the prevalence of such a cankar and practical ways in which scientific research can also be well navigated to provide undoubtedly sustainable answers to FGM. This practice has existed since time immemorial and to radically cause its extinction means to find very significant ways of drumming down the approaches/ interventions to the indigenes who should be the beneficiary of such interventions. To hear such news on FGM, is to keep on asking the salient questions any scientific researcher would ask? From your prior studies how have these interventions been 'drummed home' into the levels of consciousness of these active participants?

A colleague once told of how they (a group of researchers) had to translate Cognitive Behavioral Therapy interventions in local songs and have the community 'gate keepers' dramatize this in local plays-story-telling methods, songs and literally have drummers drum notes of the therapy in local dialects to the indigenes in some related communities in Northern Ghana. Identify the active systems of knowledge transition in the Pusiga community and ensure scientific-interventions which are community-based and very sensitive to de-tagging the practices associated with FGM in these local communities. By this, the ministry will be providing an opportunity to create the reformation of the constructs linked to FGM- which may elicit positive behavioural effects to sustain interventions. Although men are not reported in the act-I am overly concerned that targeted interventions may have deceptively missed out on their active role as 'family heads' in the decision making process. Gender-based but sensitive interventions, clearly targeting 'men/males' will be useful in drawing a holistic approach to FGM.

To say practice advocacy, does not mean to say you have not been engaged in one. This is to say that like the waning HIV/AIDS campaign on the ABC synopsis, there is a great likelihood to consciously think that FGM, may have also presented with such related fatigue. Find innovative ways of gathering more stakeholders and building FGM paradigms which are uniquely de-centralized and specific to the people of Pusiga-more importantly the women and men of all ages (not mothers only).

Think about Social Media and Technology and the varied ways in which these tools can be used to reduce the menace. In 2017, five girls from Kenya invented an app called the 'i-

cut' app to stop FGM in Kenya. The ministry may want to consider adapting the 'i-cut app' for cultural relevance or involving app developers in Ghana. There are apps now to aid in facilitating social interventions-this is also an opportunity to re-evaluate the existing traditional social interventions which may not have worked well to reduce FGM. Beyond the traditional methods, I suggest that you explore varied ways in which mobile apps can also be used as technology-based intervention to mitigate the act of FGM.

The psychological pain associated with the act may be irreparable. To think that a woman may experience this ordeal and may 'educatedly' launch her girl-child into such act is emotionally overwhelming. To save a woman is to save generations. Act now!