

# 31 Frequently Asked Questions

about Female Genital Mutilation (FGM)



# Basic Information About FGM



## 1. What is FGM?

FGM is the short form for Female Genital Mutilation. FGM is a harmful traditional practice that involves the partial or total removal of external female genitalia or other injury to the female genital organs, particularly the external female genitalia for non-medical reasons. FGM is also called FGC. This means Female Genital Cutting. It is not uncommon to see both abbreviations used together as FGM/C in some literatures. It means Female Genital Mutilation/Cutting. It is still referring to the same procedure.

## 2. Is FGM another word for female circumcision?

FGM is commonly called female circumcision. It however does not fully explain the act. Female Genital Mutilation or Female Genital Cutting fully expresses the reality of the act as explained above.. To mutilate or cut means to cause harm, injury, to amputate, to maim etc. On the other hand, basic english describes circumcision as an initiation or a rite of passage. Evidence shows that what happens to the girl child or woman is mutilation and not circumcision. Therefore the expression "female circumcision" cannot replace FGM even though it is the commonest way of refering to this harmful traditional practice.



### 3. What is the difference between male circumcision and Female Genital Mutilation?

FGM is not the same as male circumcision. The appropriateness of male circumcision continues to generate intense debates. There are documented medical benefits of male circumcision, especially the fact that it enhances hygiene and therefore reduces the chance of infections and lowers the risk of Sexually Transmitted Infections. All of these can also be prevented without circumcising the male child but requires more effort. Besides this, religion is a major driver for male circumcision. Unlike most cases of male circumcision, FGM causes major physical injury and also leaves a life-long emotional scar and pain for girls and women who are survivors (only girls and women that have died from FGM are called victims to prevent stigmatisation).

### 4. What is the external female genitalia, does this also include the Clitoris?

The external female genitalia is the reproductive part of the female body between the legs. It majorly includes the outer lips (labia majora) and the inner lips (labia minora) which is pink in colour. It also includes the clitoris – a small and sensitive organ on top of the inner lips. The portion of the clitoris seen is the size of a groundnut, about 0.3 to 1 centimetre long (only one quarter of the clitoris is seen, the other parts are inside the body). The clitoris is documented to have about 7,000 – 8,000 nerve endings while the male penis has about half that number – a clear proof that the clitoris is even more sensitive than the penis. Also called the clit, it is true that it grows throughout the life of a woman. The truth often untold is that this growth is unnoticeable unlike the case of the male penis that can grow to about 9 to 13 centimetre. Even though the clitoris does not perform any direct function in reproduction, it serves a major purpose – It unlocks sexual pleasure when stimulated during sex. It is not a vestige organ like the appendix that can be cut off without any worries.

### 5. What part of the external female genitalia is cut off during FGM?

This depends on the type of FGM being performed. It varies from communities and different cultures. There are 4 major types of cutting that can happen to a girl or woman when FGM is being done on them

- Type I, also called Clitoridectomy, involves the total or partial removal of the clitoral glans (the externally visible part of the clitoris) and/or the clitoral hood which is the fold of skin that surrounds the head of the clitoris;
- Type II is called Excision. Here, the clitoris (precisely the clitoral glans is partially or totally removed) and the inner lips (labia minora) of the vagina is removed while the labia majora (the outer folds of the vulva) may or may not be removed. This is the most common type of FGM in Nigeria with about 41% of women reporting this was the type of FGM done on them;

- Type III is known as Infibulation. It involves the removal of part or all of the external genitalia and the vaginal opening is stitched after narrowing it, allowing for a small space where urine and menstruation can pass through. It may or may not include the removal of the clitoral hood – like in Type I FGM. This is the most dangerous FGM type. Such women will have to be opened up before they can have sexual intercourse or birth a child through natural means. There is also reinfibulation where such women are stitched again afterwards.
- Type IV is the unclassified type. It includes piercing, scrapping, pricking or making an incision on the clitoris and/or the vagina lips. It is also the category used when harsh substances and herbs are introduced into the vagina. Type IV also includes the stretching of the clitoris or lips of the vagina.

## 6. What do they do with the part of the clitoris that is cut off?

The cut part of the clitoris is given to the parents of the survivor to bury. Most parents bury it deep in the ground or in the crack of walls. They believe if animals eat the clitoris, the circumcised girl will become promiscuous. There are however known cases of traditional circumcisers selling the clitoris to people who use it for preparation of special local herbs and charms. There are also reports of families stringing it like a bead round the wrist of a female child in the belief that it wards off evil spirits.

## 7. What is FGM called in our local languages?

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## 8. Who performs FGM on women and girls and how is it done?

According to findings from the National and Demographics Health Survey (NDHS) report, traditional circumcisers account for 82% of FGM done on girls (ages 0 to 14) while they also account for 76% of cutting done on women (ages 15 to 49). This also includes those done by Traditional Birth Attendants. Medical professionals are also documented as being responsible for FGM in some quarters with 7% of girls and 9% of women reporting being mutilated by them in the same report. Nurses and midwives are reported as having played major roles. Community Health Extension Workers (CHEWs) and Auxiliary Nurses have also been known to perform FGM on girls in communities.

The procedure is done using sharp objects like knives or scissors made by local blacksmiths. Some use razors or other sharp objects. The girl is held down by the circumciser, sometimes with assistance, and then the act is done while the girl screams or cries. Sedatives and disinfectants are not usually used. In some places traditional medicine like herbs or fluid from a snail is applied to aid healing of the wound. There are also reports of FGM being performed in the hospital with sterilised instruments to enhance hygiene and avoid infection.

## 9. Are circumcisers paid?

Yes, they are paid for their services either with gifts or food items in very traditional communities. When it is cash, the procedure can cost about ₦1,500. There are no fixed costs for FGM especially because the circumciser most times is known to the family and the payment is more of an honorarium to say “thank you”.

## 10. Why do people perform FGM/C on girls and women?

There are several reasons offered for why FGM is done, even though these reasons are wrong, they still continue to drive the practice of FGM. Some of these reasons include –

- Preventing promiscuity and preserve virginity until marriage;
- To perform rites of passage that initiate girls into womanhood;
- To fulfill cultural and or religious injunctions;
- Making the female external genitalia beautiful and clean;
- Prevent the clitoris from growing bigger and compete with the male penis;
- To prevent the clitoris from touching the head of the baby during delivery which if it happens, they believe it can cause the death of the child.

## 11. At what age is FGM/C performed on a girl or woman in Nigeria?

It varies from tribes and communities. In some places, girls are circumcised/mutilated on the eighth day or before age five while others perform it before they transition out of adolescence. There are cultures in Nigeria that perform it on women a few weeks before their marriage. The NDHS explains that 86% of circumcised women ages 15–49 were circumcised before age 5, while 5% were circumcised at age 15 or older.





## 12. What are the effects of FGM on girls and women?

There are immediate and long-term effects. At the time when the act is being performed, the victim may experience intense shock, uncontrollable bleeding which can cause infection and lead to severe pain, or even death. It is also known to cause tetanus infection, Hepatitis B and even HIV/AIDS when unsterilized sharp objects are used.

There is also painful urination and menstrual period flow for women who are victims of Type III FGM. The damage to the female genitalia can make sex painful and unappealing to the woman. Some women have developed keloids because of FGM. It is equally known to cause difficulties in childbirth, thereby putting the woman's life at risk. FGM has caused infertility for some women and there are notorious cases of bladder and urinary tract infection. Obstructed labour, tightened vagina which leads to caesarean section. A major effect of FGM is Vesico Vagina Fistula (VVF) wherein a girl or woman is unable to control her urine because of the damage done to them in the process of mutilation. About 85% of cases of VVF in Nigeria are caused by FGM.

FGM also has long-term psychological effects which can lead to low self-esteem, phobia, a feeling of incompleteness and depression in the victims.

## 13. Are there people who have died because of FGM?

Yes. There are several recorded cases of girls who have died as a result of shock and pain from being cut. Women are also known to have lost their lives during childbirth because of the damage FGM had earlier done to their reproductive system. A lot of evidence is hidden and incidents go unreported because it is considered a family affair. .

## 14. Are there signs that show a girl has recently undergone FGM?

Yes, there are noticeable signs and behaviours that can tell us when a young girl has recently undergone FGM. These signs include – prolonged non-attendance at school, frequent use of the toilets and usually long stays in the toilets, recurrent Urinary Tract Infection (UTIs), sudden and striking behaviour changes, discussions on acts performed on them, that should be kept secret, change of dress styles from tight fittings to loose fittings, challenges and difficulties in sitting comfortably, abnormal menstrual conditions and persistent pains between their legs.

15. I know people who have been circumcised/mutilated and they did not suffer any side effects. Nothing is wrong with them; how do you explain that?

Sexuality is not a subject easily discussed in Nigeria. While everything may look okay on the surface, there may be psychological consequences that are long-term which a survivor of FGM may be suffering from. Oftentimes, they do not even know why and they assume it is normal. In children this psychological situation may lead to behavioural stress or anxiety, Post Traumatic Stress Disorder (PTSD) and sexual dysfunction for married women which may lead to marital conflicts. Where the effects are physical, for example heavy menstrual period, chances are that as such girls grow into adulthood, she may assume that it is normal to have heavy monthly flow. The point is, there is no previous life of theirs to compare their current situation with. Hence, wrong conclusions are drawn most times that a woman who was mutilated as a girl does not have any complications, hence it is safe to mutilate other girls.

16. Where is FGM practiced?

FGM is a global issue which is commonly practised in Africa and the Middle East. In Nigeria, the practice is more common in the South than the North. According to the Nigeria Demographic and Health Survey (NDHS) 2018, FGM is most prevalent in the South East, South West and North Western parts of Nigeria in that order

Among women aged  
**15 - 49 years,**



the survey shows the following 10 states as having the highest prevalence:



**61.7%**  
Imo State



**57.9%**  
Ekiti State

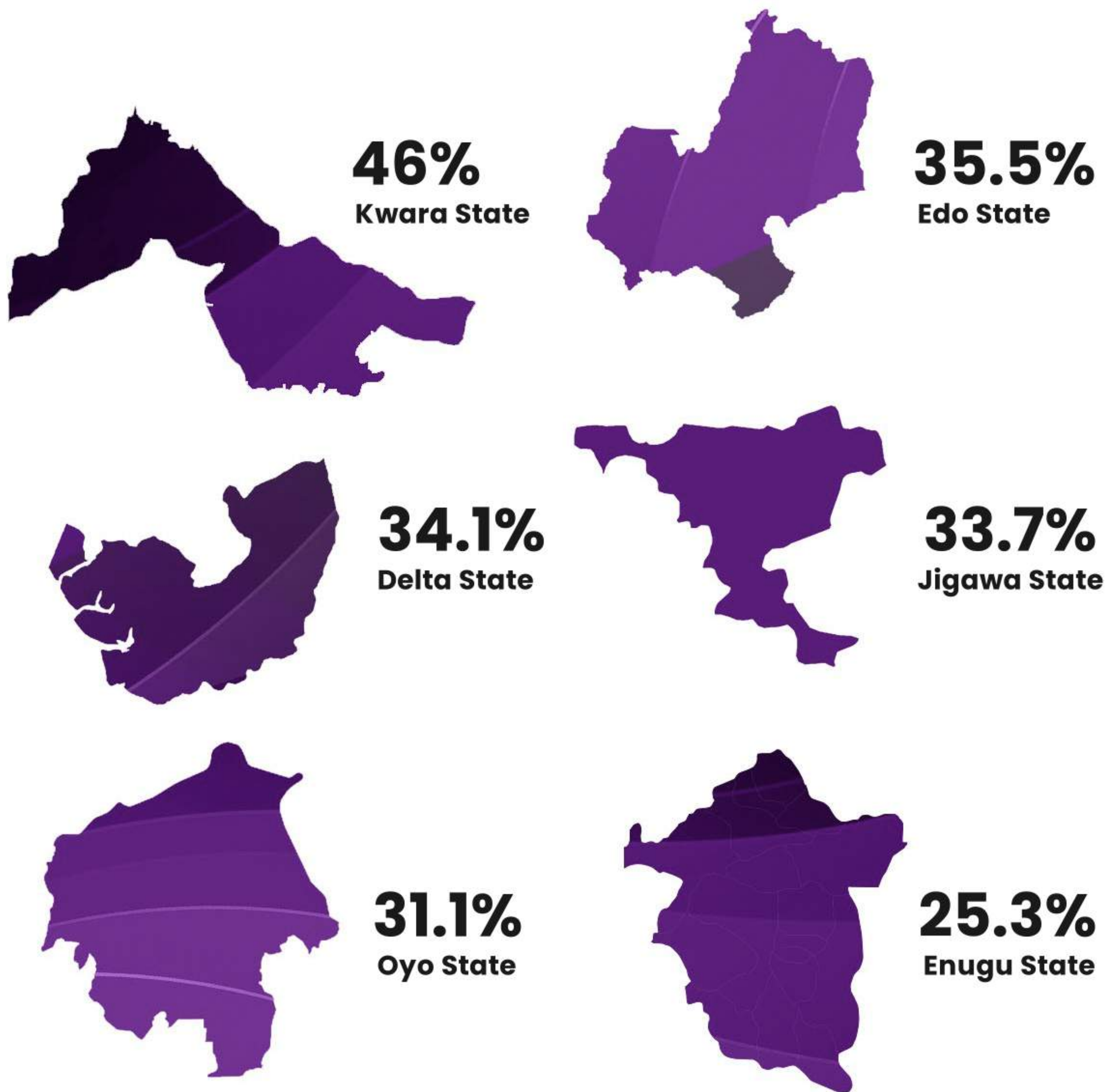


**53.2%**  
Ebony State

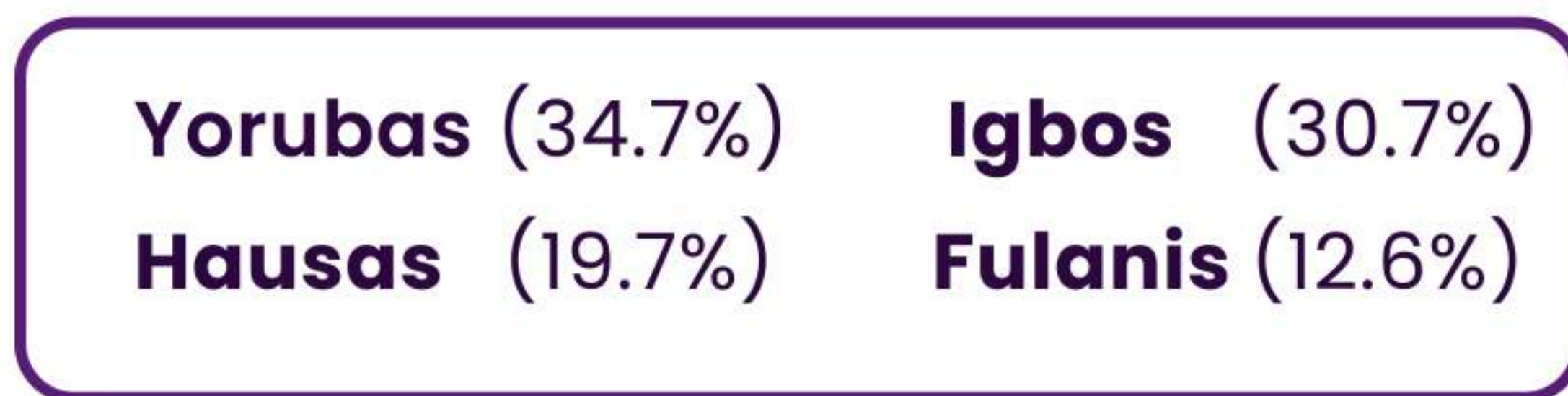


**48.8%**  
Kaduna State





Among ethnic groups in Nigeria, the survey reveals FGM is more popular among the



There is also more prevalence of the practice in the urban areas (24.2%) compared to the rural areas (15.6%).

### 17. What does the term “medicalisation of FGM” mean?

According to WHO, the medicalization of FGM is when FGM is performed by a health-care provider, such as a community health worker, midwife, nurse or doctor. Medicalised FGM can take place in a public or private clinic, at home or elsewhere. It also includes the procedure of reinfibulation at any point in time in a woman’s life. Medicalisation of FGM is still as dangerous as FGM done by a traditional circumciser.

## 18. Why is there so much effort in trying to end FGM?

Since FGM has no verifiable health benefit, ending it will help stop a form of sexual violence against future generation of girls and women and protect their human rights. The practice violates the rights of women and girls to: Physical and mental integrity, Freedom from violence, freedom from discrimination on the basis of sex, freedom from torture, cruel, inhuman and degrading treatments and right to life (when the procedure results in death).

## 19. How does FGM relate to human rights?

Children's and women's rights are protected by several national policies and international agreements, including the 1999 Constitution of the Federal Republic of Nigeria, Child Rights Act (2003), Violence Against Persons Prohibition Act (2015), Criminal Code Act and Penal Code, Administration of Criminal Justice Act (2015) and a number of other regional and international instruments. Some of these include the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), African Charter on Human and Peoples' Rights, African Charter on the Rights and Welfare of the Child etc. And according to these rights, every woman and girl has the right to the respect of her human dignity. This includes the right to control her own body and the right not to undergo harmful practices simply because of her sex.

# Religion, Culture, Gender and FGM



20. Is there at least one benefit of having FGM done on girls and women?

FGM has no known benefit. It is an unnecessary damage to the female reproductive system. It harms the reproductive cycles of girls before it starts. If anyone is benefiting, then it is the circumcisers who profit both financially and otherwise from knowing they are upholding a harmful culture.

21. But shouldn't culture be respected and preserved?

No culture in the world is static. It is constantly changing, reformed and influenced by new information and civilisation. FGM is one of such cultures that should be discontinued because it has no benefits. There are other beneficial cultures that are being sustained and are continually encouraged – one of such is child breastfeeding.

22. Does the Christian and Islamic faith support FGM?

There is no place in the Bible or Quran where FGM is encouraged. FGM predates both religions. No religion is in support of it, even though Christians and Muslims adults have had FGM performed on their daughters and female relatives.

23. Do educated people perform FGM on their daughters?

Yes. There are known cases of well-educated adults who believe in this harmful culture. The difference is that theirs is usually performed by a qualified healthcare provider; but it still does not make it right. What they are only able to prevent is the short term effect of physical injuries and maybe death. The psychological effects still persist.

24. Why has it been difficult to stop FGM?

This is because FGM is a social norm buried in tradition and culture that has prevailed for several years and people hold such sacred. The practitioners are respected members of the community and because they earn from performing FGM, they also work strongly against campaigns to end the practice.



## Myths and Facts About FGM

## Myth

As a girl grows older, her clitoris will continue to grow and so it must be cut off.

**FACT:** Like every part of the body, the clitoris grows, but it does not grow more than about a quarter of a baby's finger. It remains small throughout life. It does not grow to the size of the penis as believed in some quarters.

## Myth

The male baby's head must not touch the clitoris during childbirth, if it does, it can lead to death of the baby or cause the child to grow up and become an imbecile.

**FACT:** There is no truth in this. Women who are not circumcised are known to give birth to healthy babies whether or not the baby's head touches the clitoris during birth. Besides, there is no way the head of a child can touch the clitoris during vaginal birth.

## Myth

FGM helps to reduce promiscuity.

**FACT:** Deciding to be sexually responsible is a personal decision and there are so many factors responsible for this. FGM has nothing to do with reducing promiscuity. There are also persons who are survivors of FGM and are yet promiscuous by community standards.

## Myth

A woman who fails to be circumcised will not conceive children.

**FACT:** Infertility can be caused by several factors and becoming circumcised does not make a woman suddenly fertile. There are several other reasons why a woman can be infertile. It could even be because of the viability of the husband or partner's sperm.



## Myth

The tightening of the vagina through FGM type III helps to enhance sexual pleasure for the man which in turn prevents divorce and unfaithfulness.

**FACT:** Being faithful in a relationship has nothing to do with the condition of the vagina. There are men who are married to circumcised women and are involved in extra marital affairs and vice versa. It is a personal decision.

## Myth

**MYTH:** It is safer for FGM to be performed by a skilled health worker rather than by somebody without a medical background.

**FACT:** FGM can never be "safe". There are no safe and unsafe variants. Even when the procedure is performed in a sterile environment and by a health-care professional, there can be serious health consequences immediately and later in life. Medicalised FGM — that is FGM done by a health care provider — gives a false sense of security. Advocating for any form of cutting or harm to the genitalia of girls and women, and suggesting that medical personnel should perform it, is unacceptable from a public health and human rights perspective. Trained health professionals who perform female genital mutilation are violating girls' and women's rights to life, physical integrity and health. They are also violating their profession's code of ethics. .

## 26. What do I do if I know someone who is going to perform FGM on a girl or woman?

It is best to try and share factual information with the person if they are close relatives and are willing to listen or refer them to places where they can get detailed information on the disadvantages of FGM. Speak more about the health implications. You can also call our lines and then we'll work with you to meet with them or send a cleric, professional or former circumciser to speak with them and hopefully change their mind.

## 27. Are there laws against FGM in Nigeria?

Yes; 18 states in Nigeria, including the FCT have legislation against FGM. The federal legislation that exists is the Violence against Persons (Prohibition) Act which was signed into law in May, 2015.



Amongst other forms of violence against women, the VAPP Act prohibits harmful traditional practices like FGM and recommends four years imprisonment term and or

**N200,000**

fine for anyone who carries out the procedure or anyone who engages someone to carry it out. There are also other African countries that have laws in place, banning the practice of FGM.

## 28. How many people are affected by FGM in Nigeria?

According to an NDHS 2018 report,



**20% of women ages 15-49 are circumcised,**

**a decrease from the figure of 25% reported in 2013**

**This means 2 out of every 10 women in Nigeria have been cut.**

## 29. Are there signs I could watch out for to prevent another girl from getting cut?

Yes, there are signs. In your environment, there are visible signs that tell if and possibly when a child is at the risk of getting mutilated. These include –

- A girl born to a woman or related to persons who have been subjected to FGM;
- References of FGM made by a female child while conversing with her peers. Mother has desired to be re-infibulated following childbirth;
- One or both parents or elderly family members considers FGM as an important cultural or religious identity;
- Families have pro-FGM elders holding strong levels of influence in bringing up the female child.
- A girl is withdrawn by her family from sexuality education classes to prevent her from learning or understanding her body and rights;
- A girl drops hints about going-on to partake in 'special procedures' that will help her become a 'real woman';
- Parents announce that they or other relatives wish to travel with the child somewhere else for a long period and are obviously withholding information;
- A girl taken to a country or community known for FGM practices, especially during summer periods sometimes referred to as the 'cutting season';
- A girl requesting for help from another adult because she suspects she is at immediate risk.



### 30. How do I get more information about FGM and the campaign to End FGM?

You can take advantage of the “Frequently Asked Questions” (FAQs) on the [www.endfgm.ng](http://www.endfgm.ng) website and [www.youthendfgm.org](http://www.youthendfgm.org) – the regional platform for young people across Africa to end FGM. The websites are managed by YouthHubAfrica and the FAQs allow young people to access accurate, up-to-date information on Female Genital Mutilation in Nigeria. You can call 09097644444 if you need to speak to an officer from the Young Men’s Network Against Sexual and Gender Based Violence or the desk officer at YouthHubAfrica.

### 31. What can I do to support this campaign?

It is a good thing you want to be part of the campaign to stop this violence against women. You can speak up and educate your friends and family about stopping the practice of FGM. You can also develop dramas, write articles or compose songs about it if you have the skills. More importantly, you can pledge not to mutilate/circumcise your own child when you eventually have one. You can also follow the conversations on social media via #EndFGM and #EndFGMNg. If you are a young man, you can join the Young Men’s Network against Gender and Sexual Based Violence in your state to team up with other young people advocating against this harmful tradition.



The network can be reached on

**09097644444**

if you are in Nigeria and need more information on ending FGM or to be part of the Young men against sexual and gender based violence, visit

**[www.menagainstgbv.org](http://www.menagainstgbv.org)**

if you would like to advocate and join other young people across Africa to sign petitions on ending FGM, visit

**[www.youthendFGM.org](http://www.youthendFGM.org)**



## Further Readings

- Demographic Perspectives on Female Genital Mutilation <https://www.unfpa.org/publications/demographic-perspectives-female-genital-mutilation>
- Female Genital Mutilation/Cutting: A Statistical Overview and Exploration of the Dynamics of Change [http://www.unicef.org/cbsc/files/UNICEF\\_FGM\\_report\\_July\\_2013\\_Hi\\_res.pdf](http://www.unicef.org/cbsc/files/UNICEF_FGM_report_July_2013_Hi_res.pdf)
- Eliminating Female Genital Mutilation: An Interagency Statement <https://www.who.int/reproductivehealth/publications/fgm/9789241596442/en/>
- Understanding and Addressing Violence Against Women Information sheets [http://apps.who.int/iris/bitstream/10665/77428/1/WHO\\_RHR\\_12.41\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/77428/1/WHO_RHR_12.41_eng.pdf)
- National Population Commission, 2019. Nigeria Demographic Health Survey, Abuja.
- FGM/C in Nigeria, Telling Stories, Raising Awareness, Inspiring Change, <https://nigeria.unfpa.org/en/publications/fgmc-nigeria-telling-stories-raising-awareness-inspiring-change>

# FAQs

about Female Genital Mutilation (FGM)

