

CASE STUDY: Working with youth to prevent female genital mutilation/cutting (FGM/C) in Guinea

ChildFund **Guinea** has been working for over 12 years to develop and strengthen community-based systems of child protection in the prefectures of Kindia and Dabola. Central to these efforts has been engaging with youth and communities to fight the practice of **female genital mutilation/cutting (FGM/C).**XXX

Using its community approach, ChildFund and partners have mobilized Village Child Protection Committees, youth associations, women's associations, religious leaders and local authorities to work together to protect girls and young women from FGM/C:

FGM/C in Guinea

Although prohibited by law, Guinea has one of the highest rates of FGM/C in Africa, with 97% of girls and women age 15-49 years affected. Complex belief systems about female sexuality underlie the practice, which is deeply rooted in cultural traditions and social norms and continues to be supported by two-thirds (67%) of older girls and women.

- Community associations and local leaders run awareness-raising campaigns against FGM/C to change public perceptions and reduce the social rejection and isolation of uncircumcised girls.
- Community volunteers, including members of youth groups, conduct home visits to counsel families on the long-term, detrimental effects on girls' health and reproduction.
- A community alert system enables community groups to refer incidents of violence against children including cases of FGM/C to village Child Protection Committees whose representatives then link vulnerable children to health and social services.

The impact of FGM/C can be devastating. It can cause severe and lasting pain, urinary infection and incontinence, and affect reproduction and childbirth. Girls and women who do not undergo FGM/C may be stigmatized, or rejected for marriage and, as a result, may experience economic hardship.

A particularly innovative feature of the initiative has been the establishment of a dialogue between circumcised and non-circumcised girls and youth, which has helped to break down the social barriers between these girls and to build a sense of solidarity.

Youth and women play a critical role in this work. In an evaluation, youth and women's associations were identified as the front line in community efforts to prevent FGM/C and are seen as instrumental in addressing the stigmatization of uncircumcised girls. XXVIII

Women's involvement in village Child Protection Committees increased from 37% of committee members to 45% over the life of the project. This change reflects the importance of these key stakeholders' efforts both to change the social norms that underlie deeply rooted cultural practices and to make choices that potentially affect future generations.

