The Past, Present, and Future of Female Genital Mutilation in The Gambia

Nova Scotia Gambia Association (NSGA)
Corrinne White, Jorge A. Mendez | Oct. 2025

Nova Scotia Gambia Association

INTRODUCTION

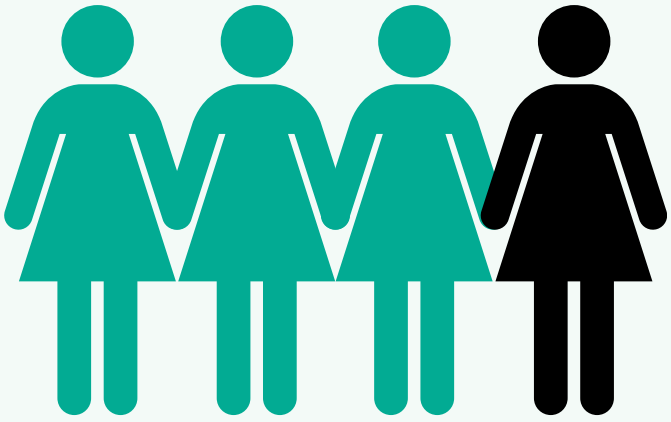
Just last month, in Wuli District, the lethality of Female Genital Mutilation (FGM) was displayed as an infant was rushed to the hospital with fatal FGM-related injury, ultimately losing her life at only one-month-old. [1]

This result appears to be the most tragic of harms related to FGM, but in reality it only scratches the surface of possible outcomes. Some of which include but are not limited to: psychological trauma, issues with childbirth and fertility, fistulae, chronic pain, and recurrent infection. [2] Despite the consequences, approximately 230 million women and girls worldwide have undergone FGM, spanning across many cultures, countries, and continents. [3] It is estimated that another 4 million will experience FGM this year alone. [3]

Here in The Gambia, the prevalence of FGM in women aged 15-49 is approximately 73% - meaning nearly three in four women have been or are at risk of being cut. [4] Despite global and national efforts to stop the practice, we've seen as low as a 1% reduction in prevalence in the last 30 years - even with a legislative ban imposed nearly a decade ago. [4]

73%

National prevalence of FGM in women and girls aged 15-49



This proves that legislation alone can't fully prevent harmful traditional practice. While partially instilling a motivation to stop related to fear of persecution, criminalization is not enough to protect our women and girls.

Photo: Student participant from NSGA programming signifying her rejection of harmful cultural practice. (2024)

Ultimately we want to see an end to FGM in The Gambia. However, reaching this goal requires an answer to two vital questions:

With a ban in place, how and why does FGM continue to persist in The Gambia?

What will it take to get to a future free from FGM?

While it is impossible to answer these complex questions with absolute certainty, we can lay out the facts so you may come to your own conclusions - only then can we come together as one to bring an end to FGM in The Gambia. This report focuses on the past, present, and future of FGM in The Gambia: highlighting where and why FGM began, how we've progressed to today, and which roads to follow that may lead to a brighter future for all women and girls - one where FGM is eradicated worldwide.

Photo: Male community member in attendance at NSGA's UNICEF-funded Magnet Theatre event on ending the practice of FGM (Central River Region - October, 2023)

Photo: Student participant emphasizing the fact that FGM has no health benefits - a common myth supporting the continuation of this harmful practice. (2024)

THE PAST: FGM'S DEEP ROOTS IN THE GAMBIA

In order to understand why legislative bans have little ability to prevent continuation of the practice, we must first acknowledge the deep roots of FGM in Gambian communities. The history of FGM is long and complex with roots spanning many different communities, countries, and cultures. Some historical anthropologists date the origins of FGM potentially as far back as 5th century BC, beginning in Ancient Egypt. [5] From there it was proposed to have traveled across Africa, Asia, and the Middle East along trade routes and, most recently, to North-America, Australia, and Europe within diaspora communities and through modern migration. [5, 6, 7] Others believe FGM has early origins in multiple locations simultaneously, rather than a single common denominator. [5, 6, 7]

Many have and continue to study the motives behind FGM in an attempt to uncover its "meaning", both in current and historical contexts. [8, 9, 10] The motivations for continuing FGM are community/culture-dependent and multi-facaeted however, they tend to relate to one or more of the following categories:

- **Control of a woman's sexuality**
- **Tradition and/or customs**
- **Social Pressure or Prevention of Social Isolation**
- **Fertility**
- **Hygiene or appearance**
- **Religion***

*It is important to note that the final category is commonly contested as many religions have adopted the practice, yet it not encouraged in religious texts and instead actively discouraged by influential religious leaders. [2]

> "[We agree] that abandoning the phenomenon of female circumcision has become a **religious legal necessity**"
>
> - Nouakchott Declaration for Religious Leaders and Scholars to Support the Abandonment of FGM, (July 2022) [5]

Regardless of meanings and motives behind the practice, International Human Rights organizations are in agreement that FGM violates an individual's human right to bodily autonomy and is an act of gender-based violence (GBV) - thus encouraging the legislative actions against FGM that nearly 26 African countries have adopted since the late 1990s. [11, 12]

> **"FGM is recognized internationally as a violation of the human rights of girls and women [...] and constitutes an extreme form of discrimination against girls and women."**
>
> - World Health Organization (WHO) [3]

Photo: Student Peer Health Educator at Niamina Senior Secondary School outreach event for elimination of FGM (March, 2022)

THE PRESENT: PROGRESS AND PUSHBACK

Despite the decades spent on efforts to eradicate the practice of FGM, many interventions are falling short in a major and discouraging way. FGM continues and criminalization proves futile with limited evidence of its effectiveness at reducing the practice, and prosecution and conviction rates remaining nearly at zero in the years following the introduction of anti-FGM laws. [11] This presents an even deeper question of whether or not current FGM legislation is merely superficial: publicly condemning the practice while passively allowing it to continue behind the scenes.

HARMFUL WESTERN NARRATIVES

Part of the issue has been identified to be related to the fact that, until recently, the majority of organizations planning, implementing, and assessing interventions held an entirely westernized perspective - often ignoring the complex and multifaceted nature of the cultures and societies of which continue to cut. In fact, a major argument stalling the anti-FGM movement is the idea that it is simply another means for Western powers to control and restrict African populations. This belief is not unlike that of which has been fuelling hesitance against the use of contraceptives or HPV vaccination. [8, 13]

This idea is not without historical justification. Harmful Western narratives fuelling dysfunctional legal structures have historically made the anti-FGM movement appear more like a neo-colonial imposition, perpetuating the belief that Western powers use FGM prohibition as a means to wipe out traditional African practices and culture.

LOCAL INITIATIVES

Fortunately, organizations like the NSGA have made serious advancements in changing this narrative by applying a West African perspective to valuable educational campaigns. We target local populations by understanding local needs and utilizing the connections and first-hand experience of Gambian activists and employees to design interventions that better suit the populations we intend to influence, resulting in real change.

Photo: Member in attendance at the NSGA's UNICEF-funded outreach event, implemented by student Peer Health Educators at Janneh Kunda Basic Cycle School (March, 2022)

Nonetheless, the process of FGM elimination has been a slow and tedious one, especially here in The Gambia. The first anti-FGM bill - the Women's (Amendment) Act - was passed in 2015 yet, regardless of legislative change and activism efforts, the prevalence of FGM has hardly decreased. [4, 14] In fact, a bill was brought up for consideration in 2024 that would have - had it been passed - effectively reversed the ban against FGM, a move that would have made history with The Gambia being the first country to do so. [4, 14] Even though the bill ultimately failed to pass, pushback against the anti-FGM movement clearly remains throughout The Gambia, especially in regions like Basse where prevalence rates remain over 95%. [14]

This brings us back to our early observations on the effectivenes FGM legistlation. As we have observed in The Gambia, laws, without targeted action, are not enough to change mindsets and behaviours. While criminalizing FGM could contribute to the decrease of the practice if effectively enforced, we cannot stop with enforcement alone, and must also focus on programs targeting education and behavioural change.

~1%

Decrease in Nationwide Prevalence over the last 30 years [4]

Photo: NSGA Magnet Theatre on Ending The Practice of FGM (North Bank Region - October, 2023). Funded by UNICEF.

Photo: NSGA Magnet Theatre on Ending The Practice of FGM, North Bank Region (October, 2023.) Funded by UNICEF.

THE FUTURE - PATHWAYS TO ELIMINATION

In terms of our second question, a future free of of FGM can only be paved when we pair legislation changes with the following vital components of effective intervention:

OBSERVABLE ENFORCEMENT EFFORTS

While anti-FGM legislation is vital to establish nation-wide standards and values in relation to the practice, it is nothing without visible and measurable change. Deterrence away from the practice and internalized awareness of its illegality is only made possible by witnessing the impacts of legislative action enforced consistently within a society or community. While education can establish a basic understanding, true consequences cannot be understood, felt, or taken seriously unless individuals are held accountable.

ACTIVE COMMUNITY ENGAGEMENT AND EDUCATION

This portion of intervention implementation is important because collective change is reliant on mass education and advocacy efforts. It is easy to change a law and expect people who disagree to blindly follow, but this doesn't truly instil change. Instead, we must give individuals, families, and communities the resources and knowledge that allows them to make their own decisions regarding their stance on the practice's continuation and what their role is in it. With FGM being a tradition that reflects collectivist beliefs and values (e.g. a woman's passage into adulthood, traditional and religious commitment, or chastity/marriageability), the decision to give it up is one that needs to be made as a community, not by an individual. Currently, refusal to subject yourself or a daughter to FGM often appears to be the choice between physical pain/health risks and societal exclusion for you or that child - the latter of which tends to take precedence in collectivist communities. Therefore, making education central to driving the behavioural change necessary for eliminating FGM.

CONCLUSION: WHAT THE NSGA IS DOING

In order to make change here in The Gambia and provide women and families with more choices, we must target all Gambians. We need to approach anti-FGM efforts with the goal of removing societal pressures and changing perspectives of the community as a whole, in addition to supporting nation-wide legislation. It is important that written legislation, enforcement efforts, and family-, community-, and nation-wide moral values all align with one another. However, this is a cyclic relationship: values influence legislation which in turn influences enforcement efforts, but law enforcement also influences individual mindset by setting a clear definition of what society values as "good/right" or "bad/wrong".

By facilitating the peer-education and community outreach programs, the NSGA is helping youth spread the truth about FGM to their families and communities in order to prompt actual change within their society from the ground up. Not only will they have the power to form their own ideas and opinions about the practice, but also to take an active role within their communities. Education gives youth the power to break the chain of harmful practices and build a future where no woman or girl will lose their life to FGM ever again.

We encourage you to take the information you read here and share it within your communities. Become an ambassador for human rights within your own family and work with us to make strides towards a happier, healthier and more prosperous Gambia. The road to change with regards to harmful cultural practice is not easily travelled, simply because it is not an individual decision to make - it is one that requires a collective readiness fuelled by advocacy and education.

Photo: Student Peer Health Educator at Niamina Senior Secondary School outreach event for elimination of FGM (March, 2022)

ACKNOWLEDGEMENTS

The NSGA would like to acknowledge the United Nations Children's Fund (UNICEF) and United Nations Population Fund (UNFPA) as our major funders in the fight against FGM and other harmful traditional practices. Together they form the UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation. Spanning across 18 countries in Africa and Asia, The Joint Programme is helping 20 000 grassroots organizations like us reach towards the global eradication of FGM[16]. With their continued support we can continue to educate communities on the harms of FGM and advocate for our women and girls, both at home and worldwide.

Photo: Student Peer Health Educators of Niamina Senior Secondary School at the UNICEF-funded outreach event for elimination of FGM (March, 2022)

REFERENCES

1. United Nations (UN). (2025, August 14). PRESS RELEASE: Statement by the United Nations in The Gambia on the Death of a One-Month-Old Girl Following alleged Female Genital Mutilation. https://gambia.un.org/en/299862-statement-united-nations-gambia-death-one-month-old-girl-following-alleged-female-genital?utm_source=chatgpt.com

2. Diallo, B., & Marcusán, A. (2022). NATIONAL TRAINING MANUAL FOR THE MANAGEMENT AND PREVENTION OF FEMALE GENITAL MUTILATION (FGM) FOR HEALTH PROFESSIONALS. https://gambia.unfpa.org/sites/default/files/pub-pdf/training_manual_on_fgm.pdf

3. World Health Organization (WHO). (2025, January 31). Female genital mutilation. https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation

4. United Nations Children's Fund (UNICEF). (2024, March). Female Genital Mutilation (FGM) Statistics. UNICEF DATA. https://data.unicef.org/topic/child-protection/female-genital-mutilation/

5. Muring, N. Q., & Amadou, J. M. (2025). A Historical Study of Ancient Civilizations and their Influence on Cultural Practices: The Case of Female Genital Mutilation (FGM) in Egypt. https://doi.org/10.36348/sjhss.2025.v10i07.004

6. Llamas, J. (2017). Female Circumcision: The History, the Current Prevalence and the Approach to a Patient.

7. Ross, C. T., Strimling, P., Ericksen, K. P., Lindenfors, P., & Mulder, M. B. (2016). The Origins and Maintenance of Female Genital Modification across Africa: Bayesian Phylogenetic Modeling of Cultural Evolution under the Influence of Selection. Human Nature, 27(2), 173–200. https://doi.org/10.1007/s12110-015-9244-5

8. Ledridge, A. (2024). Challenging the Western Lens: Female Genital Cutting and the Complex Intersection of Human Rights and Cultural Meaning. Honors College of Middle Tennessee State University. https://jewlscholar.mtsu.edu/server/api/core/bitstreams/f1cbaa2b-2441-48a6-9fb3-5613ac17586c/content

9. Hernlund, Y., & Shell-Duncan, B. (2007). Contingency, Context, and Change: Negotiating Female Genital Cutting in The Gambia and Senegal. Africa Today, 53(4), 43–57.

10. Tomàs, J., Kaplan, A., & Le Charles, M. (2018). Female genital mutilation/cutting in Basse-Casamance (Senegal): Multiple voices from a plural South. Journal of the Anthropological Society of Oxford Online, 10(2). https://ora.ox.ac.uk/objects/uuid:615e6227-7901-4fe7-ae25-864185ab41e6

11. Proudman, C. (2022). Female Genital Mutilation: When Culture and Law Clash. Oxford University Press.

12. UNICEF-UNFPA. (2024). 2024 Annual Report of FGM Joint Programme: Accelerating Action - Strengthening Alliances and Addressing the Pushback Against Ending Female Genital Mutilation | UNICEF. Retrieved September 16, 2025, from https://www.unicef.org/documents/2024-annual-report-fgm-joint-programme-accelerating-action-strengthening-alliances-and

13. Boivin, J., Carrier, J., Zulu, J. M., & Edwards, D. (2020). A rapid scoping review of fear of infertility in Africa. Reproductive Health, 17, 142. https://doi.org/10.1186/s12978-020-00973-0

14. The Ochid Project. (2025). Data Update: FGM/C in The Gambia. https://www.fgmcri.org/country/the-gambia/

15. FGM: Religious Leaders declaration | IPPF Arab World. (n.d.). Retrieved from https://awr.ippf.org/news/fgm-religious-leaders-declaration

16. United Nations Population Fund. UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation. UNFPA Available from: https://www.unfpa.org/unfpa-unicef-joint-programme-elimination-female-genital-mutilation unfpa.org