



February 2018 - Nine years ago, one community in Sudan decided to follow WHO recommendations and abandon the practice of female genital mutilation (FGM).

Since then, Tuti Island, a community of 21 000 residents located at the juncture where the White Nile and Blue Nile rivers merge, has been held up as a trailblazer in a growing movement to end FGM.

Today, more than 1000 communities in Sudan have abandoned the practice which has no health benefits and continues to violate the human rights of 200 million women and girls in Africa, the Middle East and Asia.

“Tuti Island is a shining example of how a community can initiate and sustain an effort to end FGM,” says Dr Wisal Ahmed, team leader in WHO Sudan’s Women’s Health Unit. “We hope the other communities who have declared abandonment in the past four years can also sustain progress.”

Sudan has one of the highest rates of FGM in the world, with most girls undergoing the practice between 5–9 years of age. Eighty-seven percent of women aged 15–49 years have been cut, and the majority have undergone the severest form – infibulation – where the genitals are stitched up after cutting, leaving only a small opening for urine to pass.

However, there are indications that the practice is decreasing among younger girls, explains Dr Ahmed. “Only a third of girls aged 0–14 years undergo FGM compared to 9 out of 10 girls aged 15–49 years.”

A multisector programme to target the country’s high FGM prevalence

Five years ago, WHO, joined the UNICEF and UNFPA programme supporting the Government of Sudan, called “Sudan Free From Female Genital Cutting”. As part of the programme, funded by the United Kingdom of Great Britain and Northern Ireland’s Department for International Development (DFID), WHO has been working to strengthen the health sector’s response to FGM by halting “medicalization” – the practice of FGM is performed by midwives and other healthcare providers.

“FGM is a human rights violation breaching the health profession’s code of ethics to ‘do no harm’. WHO and partner UN agencies are opposed to the medicalization of FGM,” says Dr Naeema Al-Gaseer, WHO Country Representative for Sudan.

Working with the Sudan Ministry of Health, midwifery schools, and health professional associations and regulatory bodies, WHO is ensuring health professionals adhere to the recommendations laid out in its *Global strategy to stop health-care providers from performing female genital mutilation*.

- [Global strategy to stop health-care providers from performing female genital mutilation](#)

As part of pre-licence training, all paramedical and midwives in the country now receive information about the harms of FGM. To date, nearly 1000 health professionals have undergone the training. And, more than 2700 medical professionals in Sudan have pledged to abandon FGM and its medicalization.

Using WHO recommendations on the management of health complications from FGM, the country is also working to ensure women who have undergone FGM receive the care, treatment and counselling they need, and are not repeatedly harmed when seeking care, especially after childbirth.

- [WHO recommendations on the management of health complications from FGM](#)

Educating young girls about the dangers of FGM is another component of the multisector programme. Since more than 70% of girls in Sudan attend primary school, WHO, in partnership with the Ministry of Education and Ministry of Health, developed and integrated FGM content within the school curriculum. Now girls learn that FGM is not a religious rite and has significant short- and long-term negative health consequences.