



FGM IN GHANA: SHORT REPORT

November 2019

Key Findings and Indicators¹



Prevalence: In Ghana, the prevalence of FGM in women aged 15–49 is 3.8%



Geography: The departments with the highest prevalence are Upper West (41.1%) and Upper East (27.8%); all other regions are below 5%



Age: Girls usually undergo FGM before the age of 5



Type: 'Flesh removed' is the most common type of FGM practised



Agent: 84% of FGM cases are carried out by traditional practitioners called 'wanzams'



Attitudes: 94.2% of women aged 15–49 who have heard of FGM believe the practice should be stopped



HDI Rank: 140 out of 189 countries (2018)



SDG Gender Index Rating: 94 out of 129 countries (2019)



Population: 28,712,066 (as at 20 June 2017), with a 2.18% growth rate (2016 est.)



Infant Mortality Rate: 43 deaths per 1,000 live births (2015)



Maternal Mortality Ratio: 319 deaths per 100,000 live births (2015)



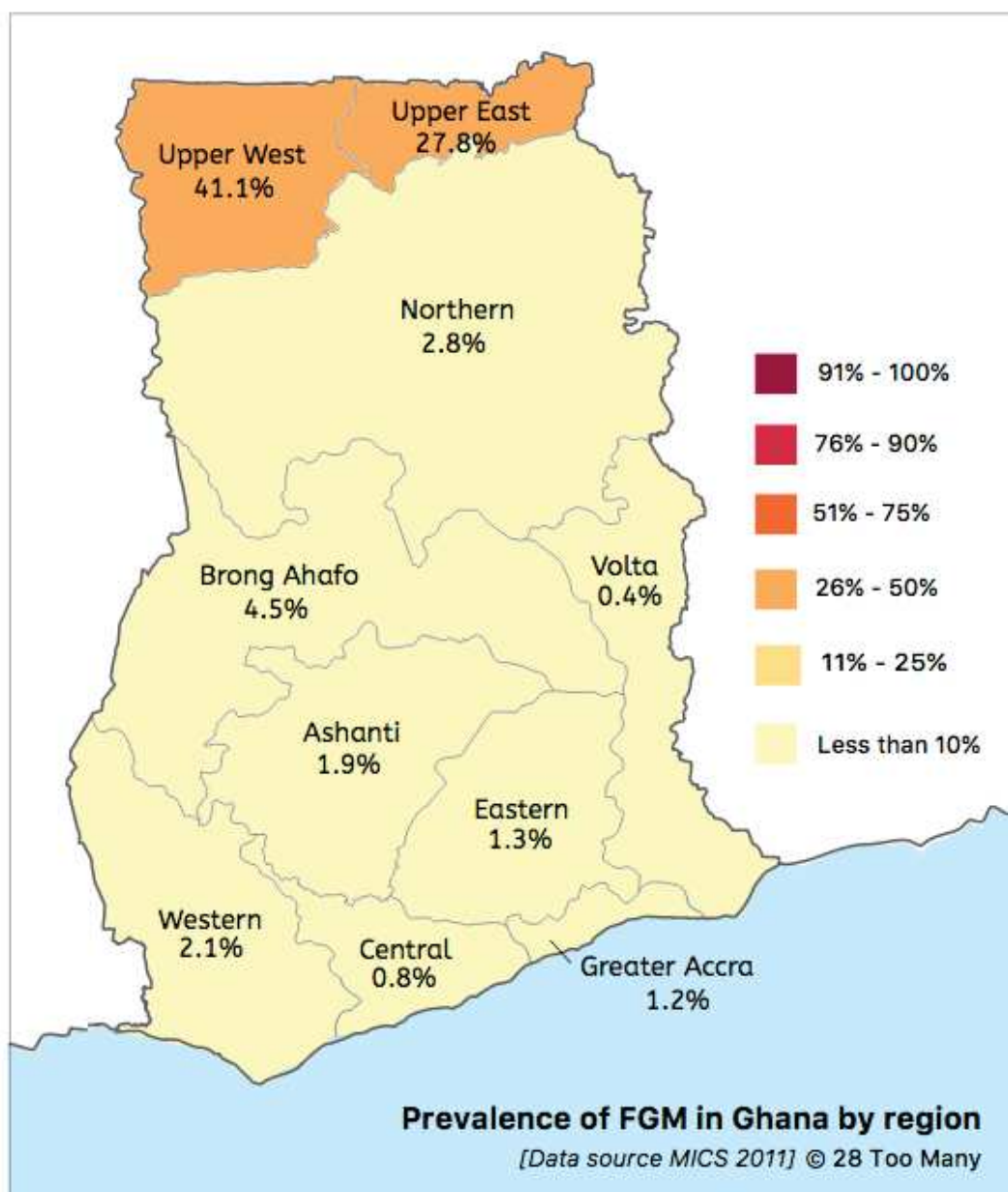
Literacy: 76.6% of the total population aged 15 and over can read/write

Prevalence of FGM

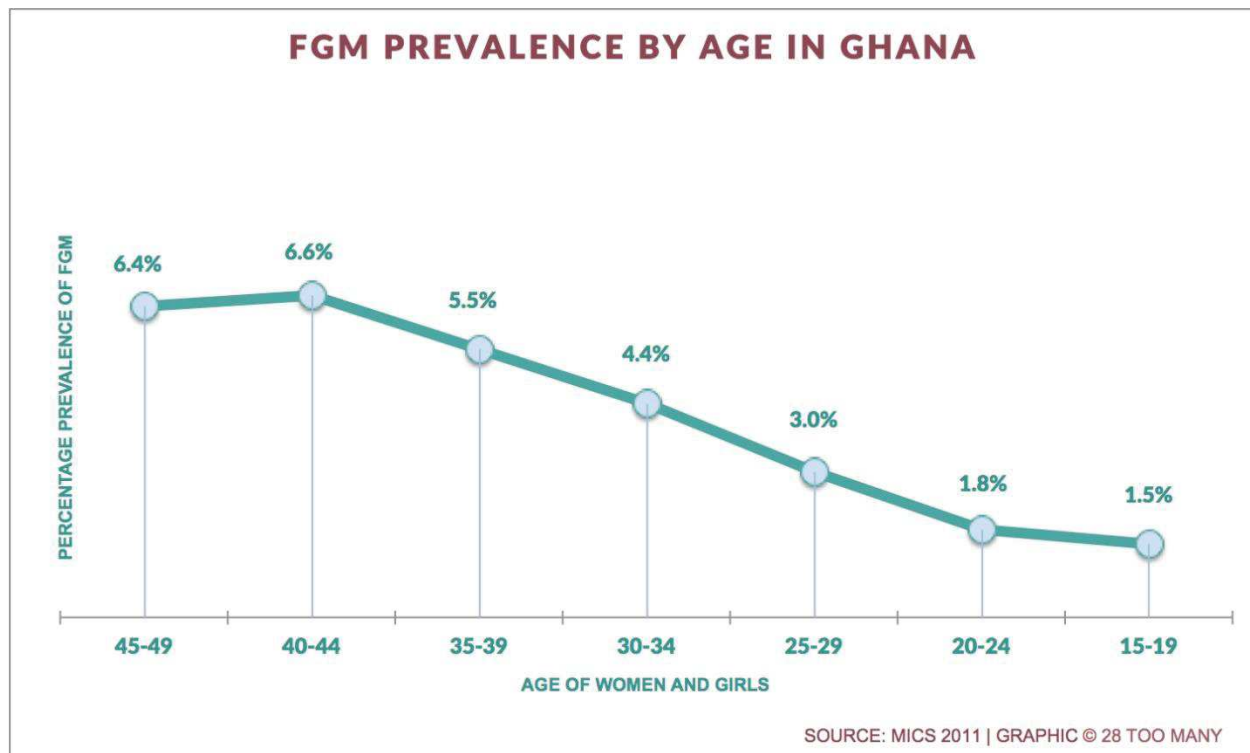
FGM is practised by several ethnic groups including the Kusasis, Frafras, Kassenas, Nankanis, Busangas, Wallas, Dagarbas, Builsas and Sisalas, who live mainly in the Upper East, Upper West and Northern regions of Ghana, and the migrant population in the south. As a result, the Upper East and Upper West have the highest prevalence of FGM, at 41.1% and 27.8% respectively (of women aged 15–49), and all other regions have a prevalence of less than 5%. The Volta region, along the east coast, has the lowest prevalence, at 0.4%. Women aged 15–49 who live in rural areas are more likely to undergo FGM (5.3%) than those living in urban areas (2.5%).

The prevalence of FGM is inversely correlated with level of education and wealth, and 94.2% of women aged 15–49 who have heard of FGM believe the practice should be stopped.²

The prevalence of FGM among Muslim women aged 15–49 who have heard of FGM is 12%, among those practising traditional religions is 10% and among Roman Catholics is 5%.³



Trends in FGM Prevalence



Between 2006 and 2011, the overall prevalence for women aged 15–49 remained the same, at 3.8%. However, breaking down the most recent data by age group shows that the prevalence for women aged 45–49 is 6.4%, while for the youngest age group this has fallen to 1.5%. Despite the fact that a small number of women may be cut after the age of 15, the data suggests that there is a trend towards lower prevalences among younger women.⁴

Cross-Border FGM

It has been reported that the movement across national borders to practise FGM is a problem for Ghana; for example, FGM is practised in the north-eastern Bawku principality and in neighbouring communities across the border in Burkina Faso and Togo.⁵

Action Aid Ghana staff have noted:

[T]he cross-border activity of perpetrators of FGM is alarming, as most Ghanaian parents cross the borders to Togo and Burkina Faso to cut their children and bring them back to Ghana. This is because the communities that patronise the practice are now aware that FGM is criminal in Ghana.⁶

Medicalised FGM

UNICEF has estimated that 9% of girls aged 0–14 who have had FGM in Ghana were cut by a health professional (as reported by their mothers).⁷

Legislation

The main law relating to FGM in Ghana is the **Criminal and Other Offences Act 1960 (Act 29), Section 69A (Female Gender Mutilation) (COA 1960)**.

In 1994 the Criminal Code (Amendment) Act inserted Article 69A to the COA 1960 to prohibit ‘female circumcision’.⁸ In 2007 this was further amended to ‘female genital mutilation’ and penalties were increased.⁹

There is limited information on prosecutions to date in Ghana.

Work to End FGM

At the national level, there is strong government support to end FGM in Ghana. Several agencies are tasked with the eradication of the practice, including the Ministry of Gender, Children and Social Protection; the Department of Social Development; the Domestic Violence Unit of the police; the Commission for Human Rights and Administrative Justice; and the National Commission on Civic Education.

The Ministry of Gender, Children and Social Protection organises programmes to raise awareness of violations of women’s rights, including FGM and its subsequent health implications. These sensitisation programmes are primarily coordinated by the Ministry and involve local government authorities such as the District Assembly, the Assembly members and other organisations including the Child Protection Network in the Upper West Region, the Police Domestic Violence and Victim Support Unit (DOVVSU) and non-governmental organisations (NGOs) working in communities. Research is also conducted by the Ministry, supported by the United Nations Children’s Fund (UNICEF).

While available data suggests that FGM prevalence in Ghana has fallen in younger age groups, civil society notes that new cases continue to be reported, particularly in the Upper West and Upper East, where pressure remains from local traditional and religious leaders to continue the practice. It is reported that ‘FGM is increasingly performed on younger girls, who are less likely to resist or report the crime. Some families apparently also send their daughters abroad to have the procedure carried out with impunity.’¹⁰ An investigator at the DOVVSU has also been quoted as saying that, because FGM ‘is known to be illegal, it is carried out when girls are as young as one month old.’¹¹ Recent reports also refer to the practice of pouring ‘hot shea butter’ (also known as *Nkuto*) onto a baby girl’s clitoris to impede its growth.

There is continuing cooperation among organisations working on anti-FGM programmes across borders; for example, between Ghana and Togo.¹² However, challenges remain, such as local resistance and accessibility to some of the more-frequently practising communities in remote rural areas. Current laws do not specifically criminalise and punish cross-border FGM.

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Cover image: Anton Ivanov (2012) *ACCRA, GHANA – MARCH 6, 2012: Unidentified Ghanaian beautiful sad girl in the street in Ghana. Children of Ghana suffer of poverty due to the unstable economic situation*. Shutterstock ID 433784668.

Please note that the use of a photograph of any girl or woman in this report does not imply that she has, nor has not, undergone FGM.



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