

### In this issue

- Success story
- Steering Committee meeting
- Health care training
- Community Training Workshops
- Checklist Development
- ACCAF at AFOG-KOGS Conference

### Media Campaign



### Advocacy Forums:

- The Girl Generation presentation in UK
- The MenEngage Meeting in Turkey
- The Girl Generation in Nairobi
- Media campaigns
- Zero Tolerance day in Samburu, Nairobi and Geneva
- Panel discussion at AFOG-KOGS conference

### LETTER FROM THE COORDINATOR



What a season of growth it has been for Africa Coordinating Centre For Abandonment of FGM/C (ACCAF)! From our launch in late December 2013, we have now recruited two members of staff who run the day-to-day activities of the centre. We have also forged partnerships with different organizations and individuals across the world. ACCAF is based at the College of Health Sciences Department of Obstetrics and Gynaecology-University of Nairobi. The centre's mandate is to accelerate abandonment of FGM/C in one generation in Africa and beyond.

This issue documents some of the success stories we have experienced so far through our activities. We hope that the stories will inspire you in your own endeavors, even as we work together to see an end to FGM.

*Prof. G. W. Jaldesa*

### MAUCHE SUCCESS STORY

ACCAF works in the community of Kipsigis speakers in Mauche, Nakuru County. In working with the community, the center hoped to focus its efforts on one group, thereafter developing a model that could be replicated in other communities during various interventions. In the course of our engagement with the community, we have been able to

train around 84 community members along with involving residents in initiating on the ground campaigns against FGM in the area. Community members who participated in our training have included elders, youth, church leaders, provincial administrators, women leaders, traditional practitioners and other members of the community. From across these age groups, we have heard stories of the practice being



recounted. We wish to highlight our successes through focusing on some of these particular groups as discussed below:

Continue to page 2



### Steering Committee meeting

ACCAF held a steering committee meeting in Cameroon in February 2014. During this time, chairs from Francophone and Arab speaking regions were nominated to coordinate anti-FGM/C activities in these regions.



### Health care training

The centre with the help of UNFPA conducted a training of health care providers where they trained/sensitized them against medicalization of FGM/C.

### a) Administrative leaders

We have interacted with chiefs in the area, who are mandated to enforce the Prohibition of FGM Act 2011, the Kenyan law that criminalizes FGM. The chiefs have participated in the trainings we have conducted, and have indicated how the information has been pivotal in their success while enforcing the law. In November and December 2014, the chiefs have been able to intercept three FGM ceremonies that had been scheduled to take place. Still, apart from arresting suspects, the chiefs engage in community building, and use public forums known as barazas to educate the residents on the practice. We have noted that such engagement with the community is significant, as chiefs are able to prevent the practice from happening rather than arresting offenders after the act has already been committed, as is the case in other parts of Kenya. Hence, designing a training and administrative curricula for chiefs will be important in the future, as they play a key role in discouraging FGM, as law enforcers and administrators who interact daily with residents.

### b) Teachers

Upon learning about FGM and its effects from our facilitators, some teachers have kept in touch with

the ACCAF team and updates them on the progress of their advocacy. One teacher informed one of our professors about a student whom she had prevented from undergoing FGM. These actions show how our training is bearing fruits, as teachers are equipped with the language to use when discouraging the practice of FGM in their area. Furthermore, teachers also interact with parents, allowing them to share information about FGM and its effects on the health, social and sexual well being of the girls.

### c) Youth

FGM as practiced in Mauche is unique, as the area is experiencing a resurgence of the practice married women now undergo



FGM rather than the traditional practice where girls would undergo the cut as a rite of passage into womanhood. One of the participants in our training had expressed his desire to have his wife undergo FGM, so that he might be able to partake in community responsibilities allocated only to men whose wives were circumcised. He was adamant in his stance, even noting that he was wary of his wife's sexual desire in his absence. However, following training with ACCAF, and having seen the practice on video and learnt of the complications that may arise thereafter, he vowed not to let his wife undergo FGM. This change in attitude signifies a success story, as the young man is then able to share with his peers

on what he has learnt about FGM and thereby discourage them from expecting the same from their wives.

In conclusion, the communities which ACCAF is working in, will benefit in many ways. Women and girls will enjoy their sexual life if either partner will not suffer pain (both physical and psychological) during intercourse as a result of the woman having undergone FGM/C. Other complications such as vaginal fistulae, infertility and cysts caused as a result of FGM/C during child birth will also be reduced. Maternal mortality and morbidity as a result will therefore be reduced. Infant deaths will also be reduced significantly, while women and girls' health will be sustained. ACCAF unlike many local organizations working towards abandonment of FGM/C has a competitive advantage due to its multidisciplinary team, ranging from legal, gender, medical, anthropological, social, and psychosocial areas of expertise. This helps in reaching out to the communities effectively, as it informs them issues of FGM/C from all these perspectives especially when it is communicated by experts.

### Community Training Workshops

ACCAF has been involved with sensitizing community leaders of complications associated with the practice which includes: long term and immediate complications. This could be physical, psychosexual, psychological, health and even death. Community leaders trained were from Mauche division in Nakuru County. ACCAF also conducted community visits where they engaged with residents of Mauche directly. This involved sharing experiences.



### Checklist Development

The centre also developed a checklist tool for monitoring anti-FGM/C activities. This is a generic tool that is supposed to be customized by organizations working towards the abandonment of FGM/C. This will help in interventions and prevent duplication of efforts.

### ACCAF at AFOG-KOGS Conference

On 20th February ACCAF hosted a panel discussion during the 39th Kenya Obstetrical and Gynecological Society and the 1st Annual African Federation of Obstetrics and Gynaecologists. The discussion focused on presenting a checklist for monitoring anti-FGM/C activities. Panel participants included a transdisciplinary group of scholars who presented on the medical, legal, social, and legal dimensions of the practice, with particular emphasis on the medicalization of FGM/C.



# CONTACT US

## AFRICA COORDINATING CENTRE FOR THE ABANDONMENT OF FGM/C

University of Nairobi  
College of Health Sciences  
Department of Obstetrics and Gynaecology  
Kenyatta National Hospital Campus  
P.O. Box 30197-00100  
NAIROBI

**Email:** [accaf@uonbi.ac.ke](mailto:accaf@uonbi.ac.ke)  
**Website:** [www.accaf.uonbi.ac.ke](http://www.accaf.uonbi.ac.ke)

**Africa Coordinating Centre for the Abandonment of FGM/C**

**@fgmresearch**

**accafkenya.blogspot.com**

**Accaf Kenya**

**ACCAF**

