



*save the slum initiative*

## Needs Assessment Report

### Pilot Project

Project Title: Ending Female Genital Mutilation

Duration: 6 Months (with potential for repetition based on success)

Project Location: 2 locations (North and South), Nigeria

Project Partners: Cornerstone International  
Save The Slum Initiative

## Executive Summary

This needs assessment report addresses the pressing issue of Female Genital Mutilation (FGM) in rural Nigeria, focusing on its devastating effects on women and girls. The project, led by Cornerstone International and implemented in partnership with Save The Slum Initiative, aims to reduce and eventually eliminate FGM in target communities. The initiative will promote awareness, provide education, support at-risk women and girls, and establish systems for prevention and protection.

Through grassroots advocacy, education campaigns, legal support, and community engagement, the project aims to break the cycle of FGM by empowering communities to adopt positive cultural practices while protecting women and girls from this harmful tradition. If successful, the pilot project will be repeated every six months, with an expanded reach.

### 1. Project Rationale

#### Context and Justification

FGM is a harmful cultural practice that involves the partial or total removal of the female genitalia. Despite legal bans in many countries, including Nigeria, FGM remains prevalent, particularly in rural and traditional communities. The practice is widely considered to be rooted in cultural beliefs surrounding femininity, purity, and marriageability, although it has no health benefits and carries significant physical and psychological risks.

- **Prevalence:** According to UNICEF, approximately 20% of Nigerian women and girls between the ages of 15 and 49 have undergone some form of FGM, with rural areas showing higher rates. In some regions, nearly 80% of women are subjected to this harmful practice.
- **Health Risks:** FGM can cause severe health complications, including infection, complications during childbirth, infertility, and long-term psychological trauma.
- **Cultural Context:** The practice is often justified by cultural norms and misconceptions about hygiene, femininity, and community belonging. Women and girls are sometimes forced to undergo FGM as a precondition for marriage or social acceptance.
- **Legal Framework:** Although Nigeria passed the Prohibition of Female Genital Mutilation Act in 2015, enforcement in rural areas remains weak, and cultural practices often override legal protections.

#### Key Objectives of the Pilot Project

The project's main objectives are:

1. **Raise Awareness and Educate:** Educate communities about the dangers and consequences of FGM.

2. Empower Women and Girls: Provide support for women and girls who have undergone FGM, including physical and psychological rehabilitation.
3. Engage Local Leaders and Stakeholders: Work with local leaders, religious figures, and health professionals to change cultural attitudes towards FGM.
4. Strengthen Legal Advocacy: Promote the enforcement of anti-FGM laws and protect victims from retribution.
5. Support Alternative Cultural Practices: Encourage alternative rites of passage that do not involve harm or mutilation.

## 2. Target Population

### Demographic Profile of Women and Girls Affected by FGM

The target population for this pilot project includes rural women and girls, particularly those in areas with high rates of FGM prevalence. The key demographics include:

- Age Group:
  - Girls (Under 18): At high risk for FGM, particularly those nearing the age of puberty or marriage.
  - Women (18-49): Those who have already undergone FGM and are at risk of further harm due to childbirth complications or continued societal pressure.
- Family Status:
  - Many of these women and girls are from families that have traditionally practiced FGM, and they may have limited options for education and employment.
- Geographic Focus Areas:
  - The project will focus on areas with a high prevalence of FGM, particularly in the Northeast (e.g., Borno, Yobe, Bauchi, and Gombe States) and Southwest (e.g., Ogun and Ekiti States) of Nigeria.
- Economic and Educational Status:
  - The majority of women in these regions have low literacy rates and limited access to economic opportunities, making them vulnerable to continued practices of FGM due to social pressure or perceived benefits.

### Community Characteristics

- Traditional Beliefs and Cultural Norms: FGM is often deeply ingrained in the local culture, with many communities viewing it as a necessary rite of passage or a way to preserve family honor.
- Limited Access to Information: Rural communities have limited exposure to accurate information regarding the health risks of FGM, and myths and misconceptions abound.
- Poor Healthcare Access: Limited access to healthcare services makes it difficult for women who have undergone FGM to receive proper medical care and support, particularly for complications like infection or childbirth issues.

### 3. Needs Assessment

#### Knowledge and Awareness Needs

- **Lack of Awareness of the Dangers of FGM:** Many women and community members are unaware of the physical and psychological harm caused by FGM. Misconceptions around hygiene, purity, and marriageability perpetuate the practice.
- **Lack of Knowledge on Legal Rights:** In many areas, women and girls are unaware of the national laws prohibiting FGM, and law enforcement may be ineffective or absent.



#### Health and Psychological Needs

- **Physical Complications:** Women who have undergone FGM often face lifelong physical health problems, including complications during childbirth, chronic pain, infections, and increased risk of HIV transmission.
- **Psychological Trauma:** The emotional and psychological effects of FGM, such as depression, anxiety, PTSD, and sexual trauma, are significant but often go unaddressed.
- **Limited Access to Healthcare Services:** Many women in rural areas do not have access to specialized healthcare services to treat or manage the effects of FGM.

#### Social and Cultural Needs

- **Community Support and Cultural Shifts:** Efforts to eliminate FGM must include community-based education and collaboration with influential community leaders, religious figures, and other stakeholders who can play a crucial role in changing societal attitudes.
- **Alternative Rites of Passage:** In areas where FGM is linked to cultural traditions, developing alternative rites of passage that celebrate womanhood without harm will be essential in gaining community buy-in.

#### Legal and Advocacy Needs

- **Strengthening Law Enforcement:** Despite legal prohibitions, enforcement remains weak. There is a need for greater community advocacy and support for victims of FGM to ensure they receive protection under the law.
- **Legal Empowerment:** Many women are unaware of their rights, and those who undergo FGM often feel powerless to challenge the practice or seek justice.

## 4. Intervention Strategies

Based on the needs assessment, the following strategies will be employed in the pilot project:

### Community Awareness and Education Campaigns

- **Public Awareness Campaigns:** Use radio, television, social media, and community gatherings to educate the population about the risks and consequences of FGM, as well as the legal prohibitions in place.
- **School and Youth Programs:** Develop programs for girls and boys in schools to educate them about FGM, human rights, and gender equality.
- **Community Dialogues:** Facilitate discussions with local leaders, religious leaders, and influential community members to change cultural norms surrounding FGM.



### Healthcare and Psychological Support

- **Health Clinics and Medical Care:** Establish mobile health clinics to provide medical support for women who have undergone FGM, including treatment for infections, childbirth complications, and counseling.
- **Mental Health Support:** Offer counseling services for survivors of FGM to address trauma, anxiety, and other psychological impacts.
- **Support for Childbirth:** Partner with healthcare facilities to ensure that women who have undergone FGM receive proper prenatal and postnatal care.

### Legal Support and Advocacy

- **Legal Awareness Campaigns:** Educate communities about the legal implications of FGM and women's rights through workshops and local outreach.
- **Support for Victims:** Provide legal support for women and girls who are victims of FGM, ensuring they can access justice and protection from retribution.

### Alternative Rites of Passage

- **Community-Based Celebrations:** Work with local leaders to develop alternative rites of passage that celebrate the transition to womanhood without the harmful effects of FGM. These celebrations will promote cultural pride while respecting women's health and dignity.

## 5. Monitoring and Evaluation (M&E) Framework

The success of the pilot project will be measured through:

1. **Baseline and Endline Surveys:** Conduct surveys to measure changes in knowledge, attitudes, and behaviors regarding FGM before and after the project.
2. **Focus Groups and Interviews:** Regular interviews and group discussions with community members, leaders, and women participants to gather qualitative data on the project's impact.
3. **Health and Legal Outcome Tracking:** Monitor the health and legal status of women who have received medical or legal assistance through the project.
4. **Partnership Engagement:** Ongoing engagement with Save The Slum Initiative and local partners to ensure that the project remains culturally relevant and sustainable.

## 6. Budget and Funding Requirements

A detailed budget will be provided in the project's financial plan, covering costs related to:

- Training materials and curriculum development
- Microfinance loans and financial literacy workshops
- Mobile healthcare units and personnel
- Infrastructure and equipment for vocational training
- Monitoring and evaluation activities