

FGM in the time of Ebola—carpe opportunitatem

Sierra Leone has one of the highest rates of female genital mutilation (FGM) in the world. Before the Ebola virus disease (EVD) outbreak, according to the Sierra Leone Demographic and Health Survey of 2013,¹ FGM had been performed on 89.6% of girls and women.

FGM is an act performed as part of the initiation ceremony into the Bondo Society. This Society is a traditional, secret women's society led by women called Soweis, who also perform FGM. It is through Bondo membership that girls (traditionally between the ages 15 and 19 years) are recognised as women in their communities.

FGM has no health benefits. Negative immediate physical health complications from FGM range from pain, shock, bleeding, and infection, to unintended labia fusion, dermoid cysts, swelling, and oedema.^{2–4} Childbirth-related complications include an increased risk of postpartum haemorrhage, caesarean section, and poor perinatal outcomes in women with FGM compared with women without FGM.⁵ There is also evidence that girls and women with FGM show a significantly higher prevalence of anxiety, somatic disturbance, depression, and post-traumatic stress disorder than do other girls and women.^{6,7}

FGM of any type has been recognised as a harmful practice and a fundamental violation of human rights, the rights to the highest attainable standard of health and bodily integrity, among others.

In July, 2014, the Ministry of Social Welfare, Gender, and Children's Affairs in Sierra Leone commissioned the development of a national strategy on the reduction of FGM. However, shortly after, the incidence of EVD climbed sharply, and the work on the

FGM strategy was deprioritised and halted.

However, during the Ebola outbreak, a plethora of other actors—among them both Paramount Chiefs (traditional heads of Chiefdoms who serve to protect the customs and traditions of their people) and some Councils of Soweis—enacted laws and pledges to postpone FGM in order to reduce the risk of EVD transmission. Penalties varied from fines up to 500 000 Leones (about US\$110) to public flogging.

In April, 2015, at a conference held by the Forum against Harmful Practices, the Political and Public Affairs Minister Honourable Alhaji Ibrahim Kemoh Sesay condemned FGM and called for its eradication. He also estimated that some 70% of daughters and female relatives of members of Parliament were no longer interested in becoming members of the Bondo Society (within which girls aged 15–19 years are formally recognised as women).⁸

As the President of Sierra Leone, His Excellency Dr Ernest Bai Koroma, declared the end of the large outbreak of Ebola in Sierra Leone on Nov 7, 2015, he also stated that “new beginning warrants that traditional practices that have a negative impact on health, and which were discontinued during the outbreak, should not be returned to”.⁹

After two new EVD cases in January, 2016, Sierra Leone was again declared Ebola free on March 17, 2016. Although byelaws that banned FGM during the epidemic have not yet been lifted officially, there has been a call by one female Paramount Chief to lift the ban and resume FGM in order to “go to the bush to uphold our culture and tradition”.¹⁰ This statement is a cause for concern.

Despite its serious consequences on mortality and the health system, the Ebola outbreak has given us a window of opportunity. Some political and traditional leaders are now speaking about stopping FGM because of its serious consequences on

the health of girls, women, and their newborn babies; is this not the time to encourage the total abandonment of the practice?

We declare no competing interests.

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