



FGM IN BENIN: SHORT REPORT

November 2019

Key Findings and Indicators¹



Prevalence: In Benin, the prevalence of FGM in women aged 15–49 is 7.3%



Geography: The departments with the highest prevalence are in the north. Of Benin's 12 departments, six record a prevalence of less than 1%



Age: 85.3% of women aged 15–49 who have undergone FGM were cut before the age of 15



Type: 'Cut, flesh removed' is the most common type of FGM practised



Agent: Almost all FGM is carried out by 'traditional agents' (including traditional cutters and birth attendants)



Attitudes: About 90% of men and women believe the practice should not continue



HDI Rank: 168 out of 189 countries (2018)



SDG Gender Index Rating: 109 out of 129 countries (2019)



Population: 11,419,331 (as at 1 May 2017), with a 2.75% growth rate (Nov. 2016 est.)



Infant Mortality Rate: 64 deaths per 1,000 live births (2015)



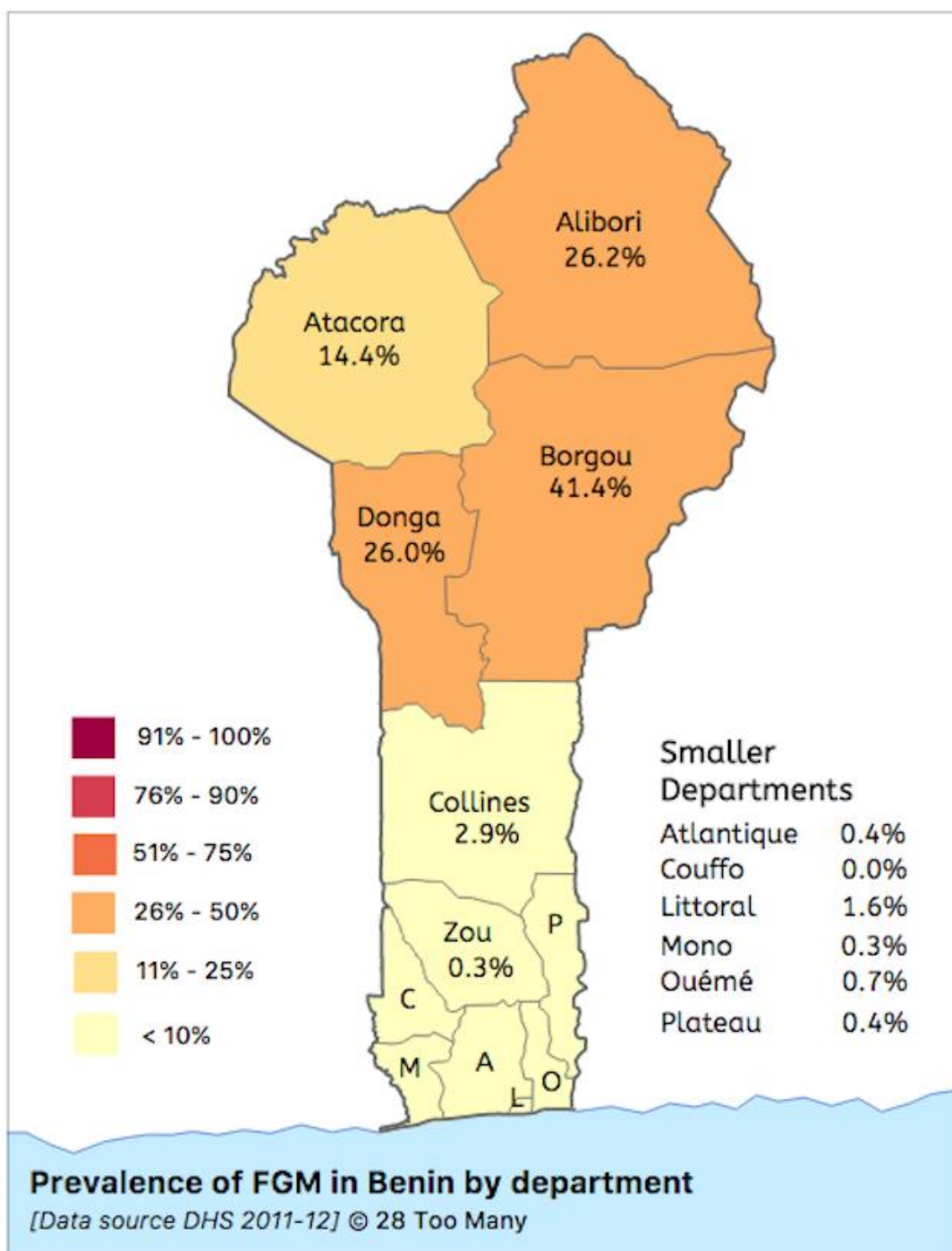
Maternal Mortality Ratio: 405 deaths per 100,000 live births (2015)



Literacy: 38.4% of the total population aged 15 and over can read/write

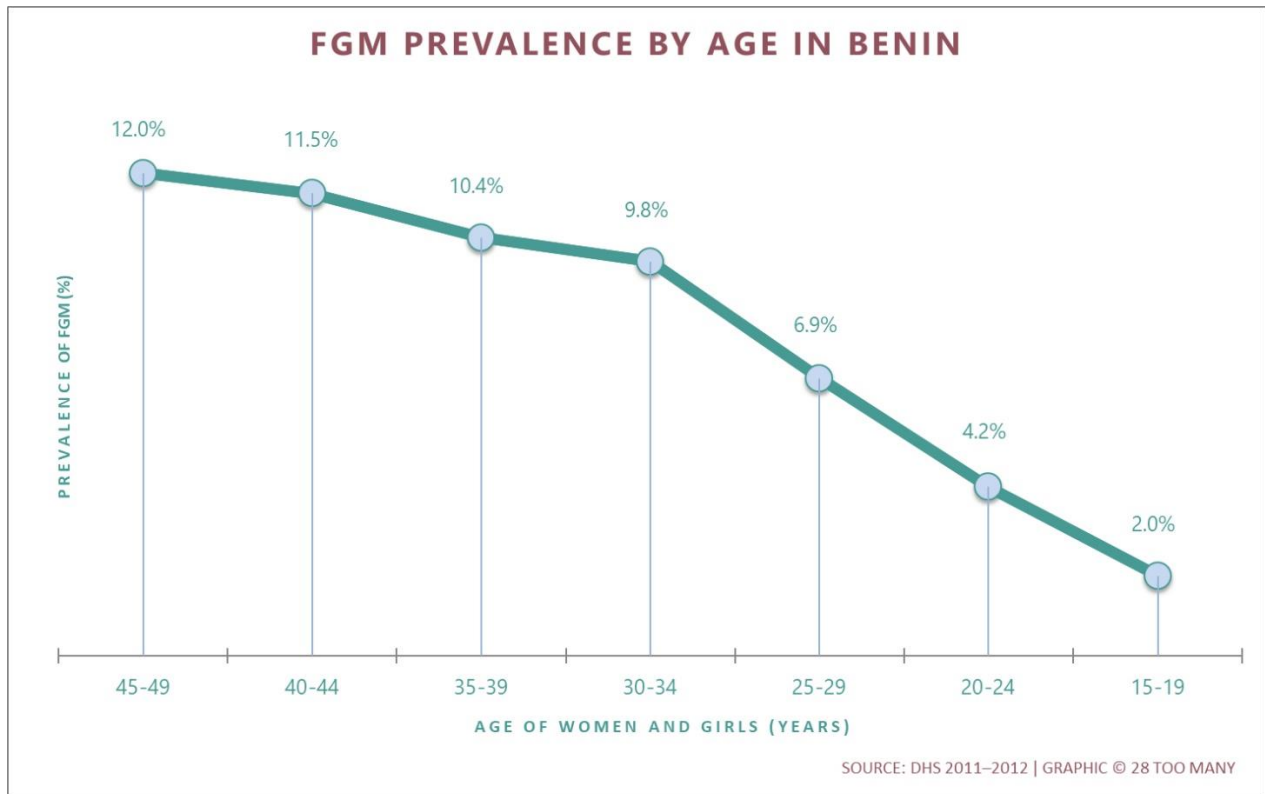
Prevalence of FGM

The departments in Benin with the highest FGM prevalence are in the north: Borgou (41.4%), Alibori (26.2%), Donga (26.0%) and Atacora (14.4%). There is a significant difference between these departments and the rest of Benin, as the department with the next-highest prevalence is Collines, at 2.9%. The department with the lowest prevalence is Couffo, in which no instances of FGM are recorded, and in six of the 12 departments, FGM prevalence is less than 1%. It is slightly more common in women living in rural areas (8.8%) than in those living in urban areas (5.5%).



FGM appears to be practised more by Muslims (27%) than by people of other religions, and there is a wide variation in levels of practice between ethnic groups: over 40% prevalence among the Bariba and Peulh, and less than 1% among the Adja and Fon.² Only 4.5% of women and 6.2% of men (aged 15–49) who have heard of FGM believe that the practice is required by religion.³

Trends in FGM Prevalence



Between 2006 and 2011/12, the overall prevalence for women aged 15–49 fell from 12.9% to 7.3%. Due to the large age-range of women included, however, the overall prevalence alone may not fully reflect the progress that has been made in recent years.

Breaking down the most recent data by age group shows that the prevalence for women aged 45–49 is 12%, while for the youngest age group this has fallen to just 2%. Despite the fact that a small proportion of women may be cut after the age of 15, the data demonstrates a clear trend towards lower prevalences among younger women.⁴

Cross-Border FGM

In some countries where FGM has become illegal, the practice has been pushed underground and across borders to avoid prosecution. Media reports suggest that families from Benin are still crossing borders to have their girls cut; Burkina Faso, Niger, Nigeria and Togo are all mentioned as possible destinations. According to one local activist in the north-eastern border town of Ségbana, for instance, people from local farms ‘regularly cross the border to get cut in Nigeria.’⁵

Medicalised FGM

The medicalisation of FGM does not appear to be significant in Benin, according to available data: only 0.2% of women aged 15–49 are reported to be cut by a health professional.⁶

Legislation

The first – and main – law prohibiting FGM is **Law No. 2003-03 on the Suppression of Female Genital Mutilation in the Republic of Benin**, issued on 3 March 2003.⁷

This was reinforced by later laws:

- **Law No. 2011-26 on the Prevention and Repression of Violence Against Women** (January 2012)⁸ – this law has a wider application as Article 2 prohibits ‘all acts of violence against any female . . . leading or possibly leading to damage or any physical, sexual or psychological pain’ and specifically refers to FGM under the main Law 2003-03.
- **Law No. 2015-08 of the Children’s Code in the Republic of Benin**⁹ – **Section IX, Articles 185–188** refer directly to FGM performed on children.

There is a lack of evidence, however, of any FGM cases having been prosecuted under these laws.

Work to End FGM

Evidence suggests that there has been progress towards ending FGM in Benin through local grassroots projects as well as anti-FGM programmes funded from international sources. Government departments have previously supported non-governmental organisations’ (NGOs) information campaigns as part of ongoing efforts to end the practice.

The introduction of legislation and related penalties in 2003 and a crackdown on cross-border movement were considered to have sent out a strong message. However, recent reports suggest that the practice may have gone underground and that some cutters who had abandoned the practice have resumed their work. Girls are also reportedly still being taken across borders to undergo FGM (which is not specifically addressed under current laws).¹⁰

References

- 1 - ('DHS'): Institut National de la Statistique et de l'Analyse Économique (INSAE) et ICF International (2013) *Enquête Démographique et de Santé du Bénin 2011–2012*, pp.332, 333, 337, 340. Calverton, Maryland, USA: INSAE et ICF International. Available at <http://dhsprogram.com/pubs/pdf/FR270/FR270.pdf> (accessed 1 May 2017).
- United Nations Development Programme (2018) *Human Development Reports*. Available at <http://hdr.undp.org/en/2018-update> (accessed 12 June 2019).
- Equal Measures 2030 (2019) *Harnessing the Power of Data for Gender Equality: Introducing the 2019 EM2030 SDG Gender Index*, pp.12–13. Available at www.data.em2030.org/2019-global-report.
- Country Meters (2017) *Benin*, 1 May 2017. Available at <http://countrymeters.info/en/Benin> (accessed 1 May 2017).
- Central Intelligence Agency (2016) *World Factbook: Benin*, 10 November. Available at <https://www.cia.gov/library/publications/the-world-factbook/geos/bn.html> (accessed 1 May 2017).
- Countdown to 2030 (2015) *A Decade of Tracking Progress for Maternal, Newborn and Child Survival The 2015 Report: Benin*. Available at http://countdown2030.org/documents/2015Report/Benin_2015.pdf (accessed 1 May 2017).
- WHO, UNICEF, UNFPA, World Bank Group and United Nations Population Division Maternal Mortality Estimation Inter-Agency Group (2015) *Maternal Mortality in 1990-2015: Benin*. Available at http://www.who.int/gho/maternal_health/countries/ben.pdf?ua=1 (accessed 1 May 2017).
- 2 DHS, p.332.
- 3 DHS, p.338.
- 4 DHS, p.332.
- 5 richard (2012) 'Pratiques des mutilations génitales féminines : La superstition fait perdurer la fin de l'excision au Bénin', *La Presse du Jour*, 27 June. Available at <http://www.lapressedujour.net/archives/17207>.
- 6 DHS, p.337.
- 7 **Loi n° 2003-03 Portant répression de la pratique des mutilations génitales féminines en République du Bénin**
- 8 **Loi n° 2011-26 Portant prévention et répression des violences faites aux femmes (9 January 2012)**
- 9 **Loi n° 2015-08 Portant code de l'enfant en République du Bénin (23 January 2015)**
- 10 Anne Mireille Nzouankeu (2017) 'Cutters turn counsellors to fight female genital mutilation in Benin', *Reuters*, 6 February. Available at <https://www.reuters.com/article/us-benin-fgm/cutters-turn-counselors-to-fight-female-genital-mutilation-in-benin-idUSKBN15LOJZ>.

Cover image: Anton Ivanov (2017) *Unidentified Beninese beautiful girl in colored shirt wears ear[r]ings at the local market. Benin people suffer poverty due to the bad economy.* Shutterstock ID 592414133.

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.



© 28 Too Many 2019
Registered Charity No. 1150379
Limited Company No. 08122211
Email: info@28toomany.org