Female genital mutilation/cutting (FGM/C) refers to “all procedures involving partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons.”¹ More than 125 million girls and women alive today have been cut in the 29 countries in Africa and the Middle East where FGM/C is concentrated. As many as 30 million girls are at risk of being cut before their 15th birthday if current trends continue. FGM/C is a violation of girls’ and women’s human rights and is condemned by many international treaties and conventions, as well as by national legislation in many countries. Yet, where it is practised FGM/C is performed in line with tradition and social norms to ensure that girls are socially accepted and marriageable, and to uphold their status and honour and that of the entire family. UNICEF works with government and civil society partners towards the elimination of FGM/C in countries where it is still practised.


**1996** National decree/legislation banning FGM/C passed

**SELECTED STATISTICS ON WOMEN’S STATUS**

- 10% of women 20-24 years were married or in union before age 15
- **52%** of women 20-24 years were married or in union before age 18
- **28%** of women 20-24 years have given birth by age 18
- **44%** of women 15-49 years think that a husband/partner is justified in hitting or beating his wife under certain circumstances
- **52%** of women 15-49 years make use of at least one type of information media at least once a week (newspaper, magazine, television, or radio)

Source: DHS/MICS 2010
HOW WIDESPREAD IS THE PRACTICE?

The prevalence of FGM/C in Burkina Faso ranges from 22 per cent to 87 per cent by ethnicity.

<table>
<thead>
<tr>
<th>Ethnic group</th>
<th>Total</th>
<th>Muslim</th>
<th>Traditional/Animist</th>
<th>Roman Catholic</th>
<th>No religion</th>
<th>Other Christians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevalence</td>
<td>76</td>
<td>87</td>
<td>22</td>
<td>81</td>
<td>66</td>
<td>60</td>
</tr>
</tbody>
</table>

When and how is FGM/C performed?

The majority of girls in Burkina Faso undergo FGM/C before the age of five.

Among daughters of cut girls and women, the percentage of girls aged 0 to 14 years who have undergone FGM/C (as reported by their mothers), by the type of person/practitioner performing the procedure:

- Cut, no flesh removed/Nicked: 53%
- Cut, flesh removed: 38%
- Sewn closed: 4%
- Type not determined/Not sure/Don’t know: 4%
- Traditional practitioner: 1%
- Health personnel: 0%

Notes: The boundaries and the names shown and the designations used on the map do not imply official endorsement or acceptance by the United Nations. Only categories with 25 or more unweighted cases are presented. Due to rounding, some of the data presented may not add up to 100 per cent. Prevalence data for girls aged 0 to 14 reflect their current, but not final, FGM/C status since some girls who have not been cut may still be at risk of experiencing the practice once they reach the customary age for cutting. Therefore, the data on prevalence for girls under age 15 is actually an underestimation of the true extent of the practice. Since age at cutting varies across settings, the amount of underestimation also varies and this should be kept in mind when interpreting FGM/C prevalence data for this age group. Other data are used to report on age at cutting since data from the most recent survey includes some girls aged 0 to 14 years who have not undergone FGM/C but are still at risk of experiencing the practice once they reach the customary age for cutting. “Health personnel” includes doctors, nurses, midwives and other health workers; “Traditional practitioner” includes traditional circumcisers, traditional birth attendants, traditional midwives and other types of traditional practitioners.

Source for all charts on this page: DHS/MICS 2010, unless otherwise noted.
WHAT ARE THE PREVAILING ATTITUDES TOWARDS FGM/C?

Approximately 9 out of 10 people in Burkina Faso think that the practice should stop

Among girls and women aged 15 to 49 years who have heard about FGM/C, the percentage who cite specific benefits or advantages for a girl to undergo the procedure:

- No benefits: 52%
- Cleanliness/Hygiene: 6%
- Social acceptance: 24%
- Better marriage prospects: 3%
- Preservation of virginity: 4%
- More sexual pleasure for the man: 0.4%
- Required by religion: 3%
- Other: 2%
- Don’t know: N/A

IS THE PRACTICE OF FGM/C CHANGING?

Fewer adolescents have undergone FGM/C compared to older women, and support for the practice has declined significantly

Percentage of girls and women aged 15 to 49 years who have undergone FGM/C, by current age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Prevalence of FGM/C</th>
<th>Think FGM/C should continue</th>
</tr>
</thead>
<tbody>
<tr>
<td>45-49</td>
<td>89</td>
<td>78</td>
</tr>
<tr>
<td>40-44</td>
<td>88</td>
<td>70</td>
</tr>
<tr>
<td>35-39</td>
<td>85</td>
<td>70</td>
</tr>
<tr>
<td>30-34</td>
<td>83</td>
<td>70</td>
</tr>
<tr>
<td>25-29</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15-19</td>
<td>58</td>
<td>70</td>
</tr>
</tbody>
</table>

Source: DHS/MICS 2010
Percentage of girls and women aged 15 to 49 years who have undergone FGM/C

Percentage of girls aged 0 to 14 years who have undergone FGM/C (as reported by their mothers)

Percentage of girls and women aged 15 to 49 years who have heard about FGM/C and think the practice should continue

Notes: Data on attitudes for Yemen refer to ever-married girls and women. In Liberia, girls and women who have heard of the Sande society were asked whether they were members; this provides indirect information on FGM/C since it is performed during initiation into the society. Egypt data refer to girls aged 0-17 years who have undergone FGM/C. Data on attitudes for Ghana are from MICS 2006, for Nigeria from DHS 2008, and for Sierra Leone from DHS 2008 as data from the most recently available MICS surveys are not comparable. In Liberia, only cut girls and women were asked about their attitudes towards FGM/C, since girls and women from practising communities are more likely to support the practice, the level of support in this country as captured by the DHS 2007 is higher than would be anticipated had all girls and women been asked their opinion.


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