







**NAFIS  
NETWORK**  
Network Against  
FGM in Somaliland

*Issue*

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*Newsletter*  
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## Chairperson's word

Welcome to the 2nd edition of the NAFIS Newsletter. The aim of publishing this newsletter is to sensitize the literate public and share with them any updates on the situation of FGM in Somaliland. This, it is hoped, will pave the way for an eventual intolerant attitude towards a practice which continues to maim and harm girls and women.

Despite the lifelong physical and psychological negative consequences of Female Genital Mutilation/Cutting (FGM/C), few people in Somaliland has yet to see FGM/C as an outdated archaic tradition that need to be abolished. To-date, in Somaliland, a negligible number of parents has taken the brave step of leaving their daughters uncut.

The vast majority of parents are either subjecting the most harmful type of FGM/C (infibulation or Pharonic circumcision) on their daughters or they have opted for the so-called "sunna" type which is undefined and which can range from a small cut (still harmful with no benefit whatsoever) to a drastic cut and stitching.

On behalf of the staff and BOD of NAFIS, as well as NAFIS member organizations, I appeal to all our readers to take up the issue of FGM/C not only as a health and a social issue but also an issue with legal and human rights dimensions. It is imperative that every one of us must act and break the cycle of inaction, tolerance and silence. Think for a moment and visualize the daily occurrence of FGM/C in our midst resulting in lifelong unnecessary suffering for innocent voiceless girls who cannot protect themselves from adults, Adults in the grip of unfounded myths and misguided beliefs.

**Amina Mohamoud Warsame**  
(Amina Milgo)  
Chairperson

# The Closing Ceremony Of The 16 Days Of Activism Of Ending Violence Against Women And Children

16 days of activism (25 November-December 9) it is a worldwide Campaign to fight violence against Women and Children and on a yearly basis is highly organized in Somaliland. The Ministry of Labor and Social Affairs leads the events in collaboration with civil society organizations, international organization and UN Agencies.

The aim of the 16 days of activism was to raise awareness on ending the violence against women and children permanently. The theme of the year (2014) was "save cities let's end violence against women".

The Commemoration of International 16 Days of activism events were Press release, panel discussions, production and distribution of appropriate IEC materials by targeting marginalized groups and internal displaced people (IDPs) through Mass media. The closing ceremony of the commemoration of international 16 days of activism was held on Mansoor Hotel, Hargeisa, participated by civil society organizations, religious and traditional leaders, government officials, international organizations and UN Agencies.

The event started with Drama that showed the importance of the peace for human being and to avoid violence against girls/women.

**Below are the quotes of the speeches:**

**Dr. Edna Aden, founder of Edna Hospital and Women activist** said, "the indigius Somali culture use to protect women and children, but nowadays we witnessed young girls and boys raped. We have to work together to eradicate violence against women and girls and to criminalize & put behind the bars such perpetrators.

**Ms. Nimco Hussein Qawdhan the vice Minister of health** said, "A community will not develop unless they respect and protect their vulnerable groups. In 2014 the number of the survivors visiting the hospitals were 409 rape survivors: 246 in Hargeisa, 80 in Borama and 83 in Burao". She blamed the increase of the rape cases due to the traditional leaders that interfere the courts and withdraw the case by preferring the customary law.

**MS. Shugri Harir Ismail the vice ministry of ministry of labor and social affairs** mentioned "FGM/C is one of the violence against women and girls it's not based on Islamic

religion, it is a traditional harmful practice that have negative impact to the life cycle of the girls/women. Every mother should stop the practice of FGM/C, fathers should be aware of the health complications of FGM/C and to protect daughters from this harmful traditional practice and urged the youth male should marry untouched girls".

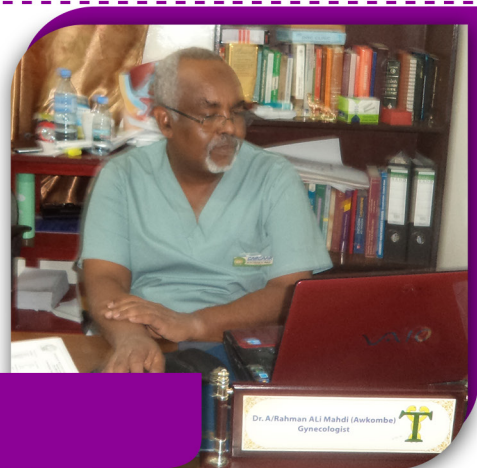
Eventually the ceremony was wrapped up by the minister of Religion and Islamic Endowment Sheikh Khalil Abdilahi Ahmed. He deeply explained the right that Islam gave to the women/girls and he said, "before Islam the girls were buried alive but Islam prohibited that practice. Prophet Mohamed "Peace be upon him" said the one who have two girls righteous and learn will be barrier from the hell. Also the prophet Mohamed Peace of Allah be Upon Him says the best of you is the one who is the best of his wife's so we have to take care our women and avoid all violence's against them".





# Health consequences of Female Genital Mutilation | Cutting

## - An interview with Dr. Abdirahman Aw Kombe



Dr. Abdirahman (Gynecologist and Surgeon) spoke to Amina Rodol (NAFIS Program Manager) about health problems of FGM and said, "FGM has no health benefits and it harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissues, and interferes with the natural functions of girls' and women's bodies". He also explained the common types of FGM/C in Somaliland as follows:

1. **Sunna type** - The removal of the tip of the clitoris
2. **Fatumo Circumcision** which is removal of clitoris with two stitches.
3. **Pharonac type:** The removal of the clitoris and labia and the sewing up of the vagina, leaving only a small opening for urine and menstrual blood - a process known as infibulation. So drastic is the mutilation involved in the latter operation that young brides have to be cut open to allow penetration on their wedding night.

The doctor was also asked to explain the short and long term consequences of FGM/C to women and girls and he said, "Short term complications can include severe pain, shock, nonstop bleeding, fainting, tetanus or sepsis (bacterial infection), urine retention, open sores in the genital region and injury to nearby genital tissue and Long-term complications include:

- Recurrent bladder and urinary tract infections
- Cysts
- Infertility;
- An increased risk of childbirth complications, fistula and newborn deaths
- The FGM procedure that seals or narrows a vaginal opening (pharonic type) needs to be cut open later to allow for sexual intercourse and childbirth. Sometimes it is stitched again several times, including after childbirth, hence the woman goes through repeated opening and closing procedures, further increasing and repeated both immediate and long-term risks.

Finally the doctor suggested the following recommendations to abandon this harmful traditional practice. People around the world are struggling eradication the human made diseases therefore it is no rational that we act creating disease and problems to our children leading negative consequence on our community. In this period of civilization when knowledge and intelligence developed,

In conclusion the doctor said, "it's not necessary to continue this harmful traditional practices like FGM, which have great deal of health complications, in this time and era of civilization when knowledge and intelligence are highly developed the world around us is trying to prevent and eradicate the existing diseases that occur in a naturally, while we are creating it on our hands". And present the following recommendations:

1. Nationwide comprehensive research about social changes and social knowledge on FGM/C.
2. To intensively implement the outcome and recommendations of that research by allocating an implementation budget at national level.
3. Massive awareness raising about the health, social and economical consequences of FGM/C through mass media like radio, TVs etc.
4. Creating awareness programs like songs, slogans, films and dramas indicating the harmfulness of FGM/C.
5. The religious leaders should take the vital role for the awareness of the community to abandon this harmful practice
6. Strengthening and coordination and networking mechanism by increasing the capacity of the organizations working on FGM/C to redouble this campaign.
7. To scale up the education of the community can be agent of change.

# The Effectiveness of Intergenerational Dialogue Meetings

NAFIS Network with collaboration of its member organizations and support of UNDP, facilitated community dialogues and discussions about their issues including the harmful practices like female genital mutilation (FGM), rape and domestic violence in their communities. The implementation areas was Hargeisa Internal displacement people areas like Akara, ShiekhNur and Mohamed Moge.

These regular meetings were participating by different parts of the communities like elders, women, religious and traditional, youth, circumcisers, community committees and police representatives. The focus of these meetings were to discuss the problems of the villages such as Gender Based violence and etc. and prioritize the solutions of the identified problems. These meetings were resulted that leaders and community as whole feel the violence against women and children like FGM/C, Rape and other violence's an established a committee from

the different parts of the community also NAFIS Network trained 30 youth from the tree IDPS, working voluntarily to coordinate and aware the community.

At the conclusion of these meeting the community agreed to work to gather and continue these meetings with the hosting of the community committee and stop all valence's against women and children especially (FGM), rape and domestic violence.

The lessons learnt from these intergenerational dialogue meeting is the best way to achieve better results to abandon this harmful traditions



## What is achieved in the year 2014?

### Fighting against Female Genital Mutilation

Fighting against Female Genital Mutilation is not an easy task which can be accomplished in few years, it is deep rooted tradition which have been performing for centuries. To abandon this harmful practice, we need sequences of efforts (campaigns) which are complementing each other to achieve the expected results which are abandoning the FGM/C in Somaliland. This year (2014) the following bullets can be highlighted to be the major achievements for the eradication of FGM/C:

1- A comprehensive research about FGM/C which funded by Kindernoithilfe and UNDP and implemented by NAFIS Network. The research were conducted throughout Somaliland regions and started from March up to July 2014 focused on these two areas:

(a) Finding out the current the prevalence rate of FGM/C and

(b) Assess the social trends and public perception of FGM. Final report of the research will be launched on 06 February 2015, the international commemoration day of FGM/C.

2- girl summit conference for female genital mutilation and early girl marriage sponsored by British government and UNICEF in London on 22nd of July 2014, the meeting was attended on the behalf of Somaliland by delegation

led by the First lady of Somaliland Amino Haji Mohaoud Jirde (Amina-Weris) who has delivered a keynote speech in which clearly stated that Somaliland government is committed on the eradication this harmful traditional practice but needs to engage all kinds of the society of Somaliland, the speech of the first lady could be followed on our website [www.nafisnetwork.net](http://www.nafisnetwork.net))

3- Since the majority of the Somaliland society practices FGM/C as it's a religious requirement, Some religious leaders were very conservative to debate FGM/C in Islam but this year after a lot of debates and side discussions they allowed to debate against those religious leaders who belief zero tolerance of FGM/C in Somaliland. These activities will lead to reach a consensus between the religious leaders.

4- Coordination and networking mechanisms for FGM/C stakeholders become very effective since all the stakeholders were very committed to attend the regional and national coordination meetings and also monthly Hargeisa meetings called FGM/C taskforce. Which resulted to share Ideas, challenges and best practices then unify messages of the different stakeholders to the community which is to eradicate all forms of FGM/C in our community.



# I have discarded been a traditional circumciser

*"Hali used to circumcise girls but discarded it"*

Hali DhidarHashi, was among the women who practicedcircumcision for a long time especially themost sever type called Pharaonic circumcision.She said"I was traditional circumciser for long time and she added performing the FGM/C was difficult, due to the hemorrhage, and bleedingsince I was not a trained medical person and doesn't have the right equipment to perform such operations, I used traditional material that are accessible, such as thorns and threads and others". She also mentioned that this was her only income source to feed her family.

Hali also said, "I was a traditional midwife, during delivery women were encountering manycomplications like prenatal child death,maternal mortality, infections, bleeding, long labor and so on. I was not aware of that such difficulties are due to FGM/C practice. After attending many trainings, meetings and discussion organized by NAFIS Network and Other FGM/C stakeholders I recognized all the above mentioned complications were caused by FGM/C and that FGM/C is not an Islamic obligation.

"Now I have decided to stop performing this harmful traditional practice and to actively participate the campaign against FGM/C".



## A new Model of poverty reduction and sustainable development (Self Help Approach)

Self-help Group (SHG) approach is powerful development model which recognizes poverty not as material deprivation but also as a continuous process of disempowerment. It aims at transforming individuals and communities from poverty and hopeless.

The outcomes hunted at SHG concept are that members, who started very poor, developed economically and socially. They started a business for their own (without external help) this resulted increase of family income and has direct positive effect on their children. They sent to go the school, nourished better, healthier and peaceful environs. In this approach a high number of groups and large numbers of people give impulses for economic and social changes which allow the structural causes of poverty to be tackled. It is long-term development process.

In Somaliland there are number of Case studies that indicate positive change of this concept since 2013

IDP in Hargeisa. She is member of HORSEED SHG Group established by WORDA Organization.

Before she joined to the HORSEED SHG she was hasn't involve anything she was a housewife her husband has no regular job, her children has no School uniform, then after she joined HORSEED SHG she was willing to be member but the problem was she wasn't able to pay the weekly saving of 6000 SLSH (\$0.8).

Since she have at the home an idle tailoring swing machine the SHG members empowered her to get the first loan of 200,000 SLSH (\$28.5) and start a business to sustain her membership and improve her family income to care her children and sent to the School. Now after One year she has upright dream and has a good business, her family income is doubled, her children want to the school happily and she is active member of her SHG Group.



Fardus Hassann lives in Mohamed Mooge