



MARKET DAY SENSITISATION AND BASELINE SURVEY ON FEMALE GENITAL MUTILATION

STATISTICS REPORT

***Lower River
Region***

December 2018

***Produced by:
Think Young Women***

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AmplifyChange***



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Foreword

Over the years, The Gambia Government has initiated a number of activities on women's rights. Despite the various national interventions and achievements, there still remain some significant injustices inflicted against women, in the form of sexual and gender-based violence, leading to gender gaps and inequities that expose young people to reproductive health problems; Female Genital Mutilation (FGM), resulting to poor maternal health indicators for women and girl-children of The Gambia are key factors.

The Gambia has enacted various legislation safeguarding women's sexual and reproductive health and rights. In 2015, the Women's Act 2010 was amended to include a prohibition on FGM, a form of sexual gender-based violence (GBV). However, sex and sexuality are hardly spoken about in Gambian communities. Thus, the sexual reproductive health and rights of women and girls is an issue for concern. Having enacted legislation and put in place punishments in the form of fines and imprisonment for people who perform FGM and child marriage in The Gambia, it is not enough to bank on this law but to also reach people in their communities with not just information about the existence of such a law, but also with accurate and adequate information about FGM and Child Marriage and the need to stop the practice in the Gambia.

In line with the recommendations and findings in the AmplifyChange 2017 funded project, this survey is an expansion project to cover the Lower River Region (LRR) of The Gambia, a constituency with a very high prevalence rates on GBV as per the 2013 Demographic Health Survey. This was a one-day activity held on 1 December 2018 within and around the Soma, Lower River Region Market on a "Lumoo" (market day), aimed at reaching vendors, especially market women and men, to take part in the survey by responding to questionnaire, and being sensitized through the use of experts in the form of resources persons, who moved around the market to hold discussions with individuals and groups, about FGM, citing its health and social-cultural complications. This report contains detailed data and findings.

We hope that this report will contribute significantly to efforts geared towards the abandonment of these harmful practices in The Gambia. We promise to play our part fully, in solidarity with the forerunner Non-Governmental Organisations (NGOs) in the campaign and with absolute commitment and respect to the values that we all share in common and cherish. We are ready to be held accountable for the results we achieve and for the support and resources we receive to bring an end all forms of harmful traditional practices.

Musu Bakoto Sawo
National Coordinator

Acknowledgement

The executive committee, staff and members of Think Young Women, wish to extend their sincere gratitude to the following institutions and individuals for making the Market Day Sensitisation and Data Collection, a success:

- To AmplifyChange for the financial and moral support towards the success of this activity, we are highly grateful;
- We recognise Ms. Haddy Jonga, the Programme Officer who oversaw the implementation of this activity;
- We commend the Consultant and Data Analyst, for his time and efforts in making this campaign a success and preparing this analysis report
- We appreciate the efforts of the booth attendants and supervisors in helping to achieve the goals of this activity;
- Special thanks and appreciation go to the Regional Youth Committee of the Lower River Region, through the Chairperson, who led the ground facilitation and identification of locations for the activity;
- We appreciate the efforts of all members and staff of Think Young Women, for their individual and collective contributions towards this event.

Chapter 1: Introduction

1.1 Background

In order to develop a more effective programme of intervention in the campaign to abandon the practice of Female Genital Mutilation (FGM) it is necessary to identify the knowledge and attitudes of people about FGM and the gaps therein.

In line with the recommendations and findings in the AmplifyChange 2017 funded project, this survey is an expansion project to cover the Lower River Region (LRR) of The Gambia, being a constituency with a very high FGM prevalence rates as per the 2013 Demographic Health Survey.

This Baseline Survey study has therefore been conducted cognisant of the priority objectives of the Market Day Sensitization which are to:

- Raise awareness about Sexual and Gender-Based Violence with specific focus on FGM;
- Encourage the use of dialogue in changing the mindsets of people concerning FGM;
- To gauge the perception of people living and working in the Central River Region on FGM, the reasons for its practice and to understand their perception;
- To document and share the voices of young people regarding FGM/C so as to influence policy makers;
- Encourage the use of media messages such as pictures, flyers and videos in convincing the general public to actively engage in the abandonment of FGM in The Gambia;
- Empower the general public on issues of FGM in order to accelerate its abandonment

1.2 Methodology

This survey was conducted to gauge the Knowledge, Attitude and Perceptions (KAP) of respondents on FGM. A cross sectional descriptive survey was employed in this study with the target population being 250 respondents from various communities in Lower River Region. The respondents were chosen randomly and also based on their willingness to participate in the survey

the respondents totalled to 266 respondents. A questionnaire was developed, and a draft was sent to Gambia Bureau of Statistics (GBoS) for review. Adjustments were made to some components based on suggestions from GBoS before the actual data collection process took place.

The data collection activity commenced on 1st December 2019 at 10:00 am. The survey team consisted of enumerators and volunteers some of whom were staff of TYW and trainers. Interviews were conducted on a face to face basis and in a language the respondents were most fluent in. Where language barriers exist, translators were used to ensure that the questions asked by the enumerators were well and truly understood.

After the data collection was concluded in December 2018, the questionnaires were then returned to the TYW office for data processing. The questionnaires were first edited after they were returned to the office and later coded for entry purpose. The data entry was done with the use of Census and Survey Processing System (CSPro) version 7.1. Finally, after the data entry, the dataset was cleaned and analysed using Stata version 14. Stata version 14 was used for generation of tables. The data was presented in charts and bar graphs and was also analysed using frequencies and percentage.

Chapter 2: Socioeconomic Characteristics

The field work for the survey was conducted in November 2018. The survey was conducted during the normal weekly market day locally called “Lumoo” in Soma, Lower River Region. A total of 266 persons were interviewed during the Lumoo day, out of which more females were interviewed in the survey compared to males (195 females vs 71 males). By age group, most of the people interviewed aged 18 – 24 years (82 persons) followed by those aged 25 – 34 years (77 persons). This shows that most of the people interviewed during the survey were youth aged 18 – 34 years (see Table 1).

Table 1: Percentage distribution of Sex by Age Group of the respondents

Age Group	Sex		Total
	Female	Male	
10-17	14	3	17
18-24	71	11	82
25-34	48	29	77
35-44	16	13	29
45 and over	23	9	32
Don't know	7	0	7
Not stated	16	6	22
Total	195	71	266

Figure 1 shows that almost 3 out of every 4 of the respondents were females. Furthermore, the data in Figure 2 shows that more than half (59.8%) of the respondents were aged 18 – 34 years.

Figure 1: Percentage distribution of Respondents by Sex

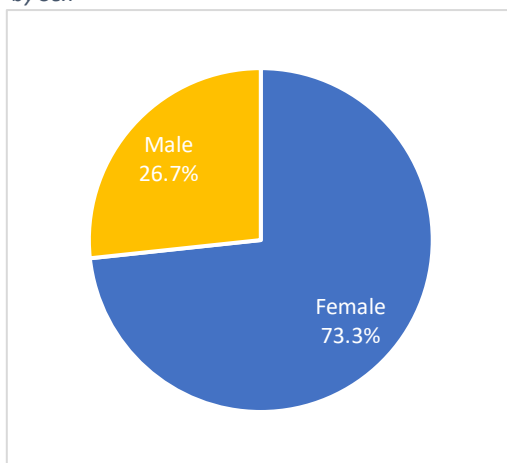


Figure 2: Percentage Distribution of Respondents by Age Group

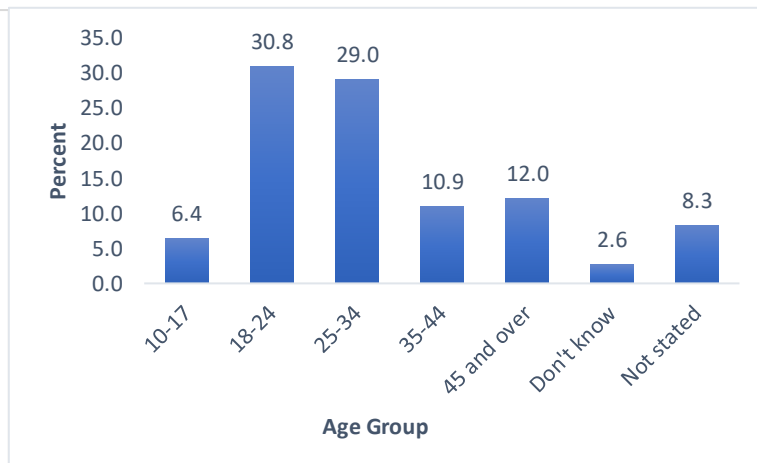


Figure 3 shows that most of the respondents were married (57.1%) followed by those that were single (36.5%). By ethnicity, the data shows that almost half of the respondents were Mandinkas (49.6%) followed by followed (27.4%) (See Figure 4). By educational attainment, almost 3 out of 10 of the respondents had no formal education (See Figure 5).

Figure 3: Percentage distribution of Respondents by Marital Status

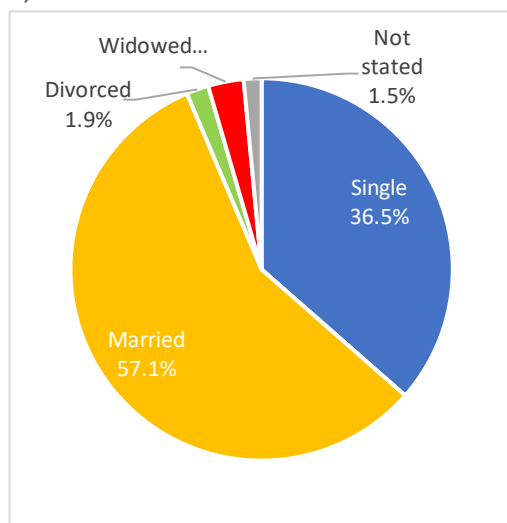


Figure 4: Percentage distribution of Respondents by Ethnicity

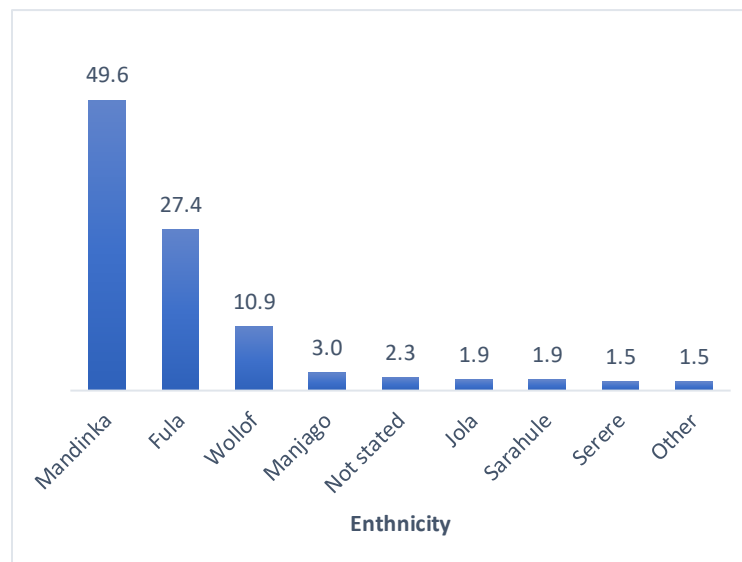
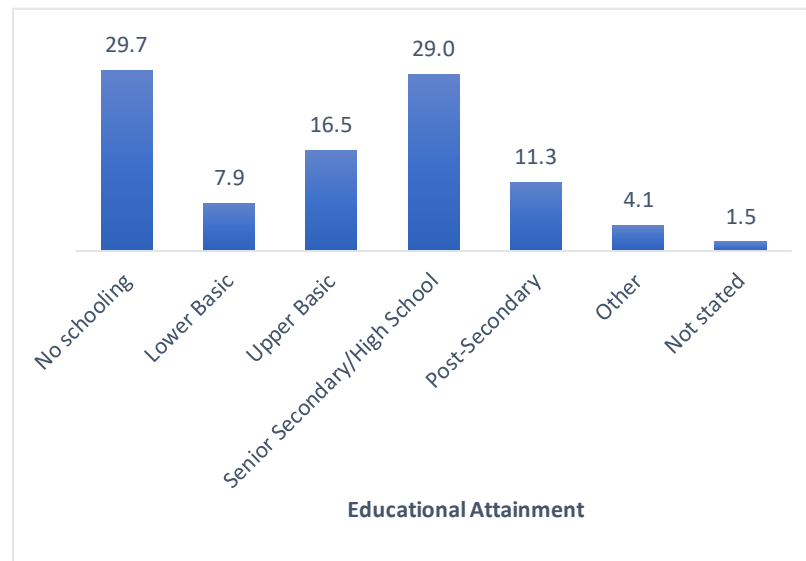


Figure 5: Percentage distribution of Respondents by Educational Attainment



Chapter 3: Knowledge and Perception on Female Genital Mutilation – Statistical Results

The chapter focuses on the knowledge of respondents on FGM, sources of information on FGM, knowledge of respondents on legal frameworks of The Gambia on FGM, perception of the respondents on whether GBV should be stopped and whether they have ever opposed violence against women.

Respondents were asked whether they have ever received information on FGM. The data in Table 2 shows that 9 out of ten 10 of the respondents reported ever receiving information on FGM. By sex, more females ever received information on FGM compared to males, 93.8 percent and 85.9 percent respectively.

Table 2: Percentage Distribution of Information on FGM by Sex, Age Group, Marital Status, Educational Level, Religion and Ethnicity

	Information on FGM		
	Yes	No	Not stated
Total	91.7	7.9	0.4
Sex			
Female	93.8	5.6	0.5
Male	85.9	14.1	0.0
Age Group			
10-17	94.1	5.9	0.0
18-24	85.4	14.6	0.0
25-34	93.5	6.5	0.0
35-44	96.6	3.4	0.0
45 and over	100.0	0.0	0.0
Don't know	85.7	0.0	14.3
Not stated	90.9	9.1	0.0
Marital Status			
Single	83.5	16.5	0.0
Married	96.7	3.3	0.0
Divorced	100.0	0.0	0.0
Widowed	100.0	0.0	0.0
Not stated	75.0	0.0	25.0
Educational Level			
No Schooling	96.2	3.8	0.0
Lower Basic	100.0	0.0	0.0
Upper Basic	93.2	6.8	0.0

	Information on FGM		
	Yes	No	Not stated
Senior Secondary/High School	88.3	11.7	0.0
Post-Secondary	93.3	6.7	0.0
Other	63.6	36.4	0.0
Not stated	75.0	0.0	25.0
Religion			
Muslim	91.4	8.2	0.4
Christian	100.0	0.0	0.0
Not stated	94.7	5.3	0.0
Ethnic Group			
Mandinka	93.2	6.8	0.0
Wolof	96.6	3.4	0.0
Fula	84.9	13.7	1.4
Jola	100.0	0.0	0.0
Sarahule	100.0	0.0	0.0
Serere	100.0	0.0	0.0
Manjago	100.0	0.0	0.0
Other	100.0	0.0	0.0
Not stated	83.3	16.7	0.0

Respondents were also asked whether FGM is practiced in their communities. The data shows that close to half of the respondents (47%) reported that FGM is practiced in their communities while 35.6 percent reported that it is not practiced in their communities. (See Figure 6).

Figure 6: Percentage Distribution of FGM Practice in the communities of the respondents

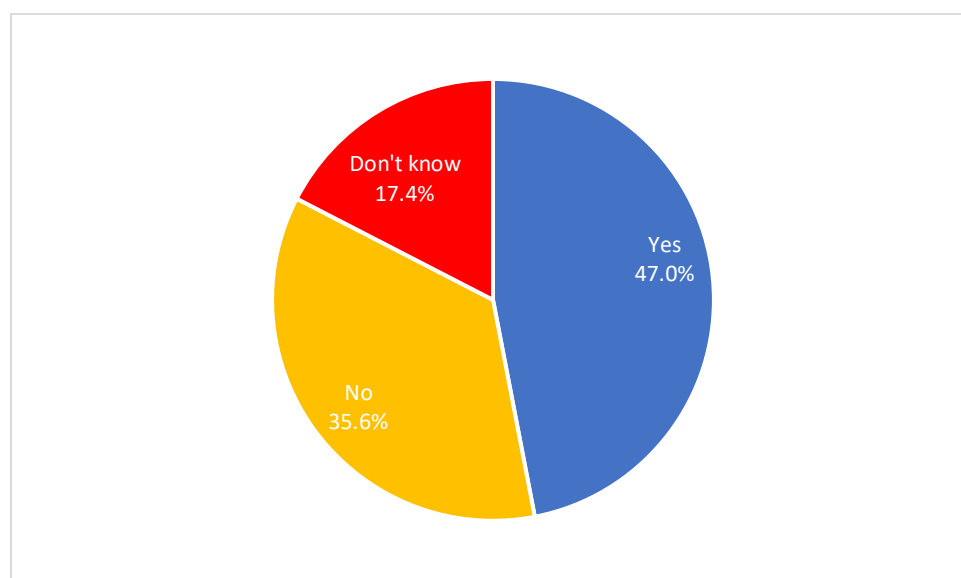


Figure 7 presents the information sources on FGM respondents get information on FGM from. The source of information on FGM which was reported the most by respondents was radio, followed by family members (39.6%) and television (27%). Thus, the use of the media particularly, the electronic media to sensitize people on FGM is a good initiative.

Figure 7: Percentage distribution of information sources on FGM

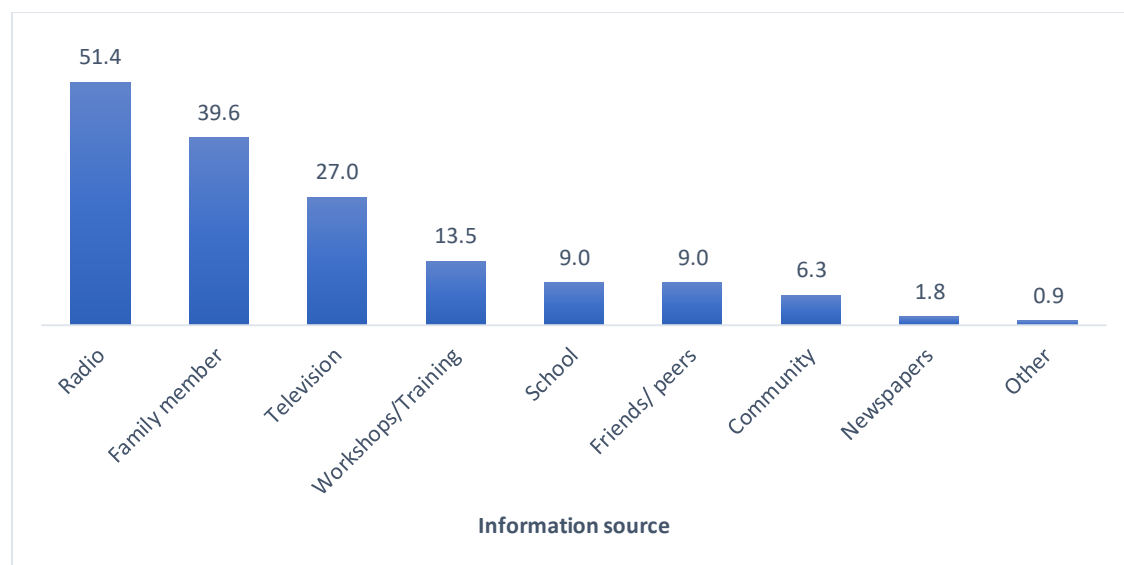


Table 3 presents information on who makes the decision to circumcise the girl child. More than half (51.5) of the respondents reported that the mother alone makes the decision followed by those who reported that both parents (36.8%) are involved in deciding whether their girl child is to be circumcised or not. By sex, more females reported that the mother alone makes the decision (57.9%) compared men (33.8%).

Table 3: Percentage Distribution of Circumcision Decision by Sex, Age Group, Marital Status, Educational Level, Religion and Ethnicity

	Decision for a girl to be circumcised					
	Mother	Father	Both Parents	Other	Don't know	Not Stated
Total	51.5	2.3	36.8	3.4	2.6	3.4
Sex						
Female	57.9	2.6	29.2	3.6	2.6	4.1
Male	33.8	1.4	57.7	2.8	2.8	1.4
Age Group						

	Decision for a girl to be circumcised					
	Mother	Father	Both Parents	Other	Don't know	Not Stated
10-17	41.2	0.0	41.2	5.9	0.0	11.8
18-24	58.5	2.4	28.0	4.9	1.2	4.9
25-34	41.6	0.0	50.6	2.6	3.9	1.3
35-44	55.2	6.9	34.5	0.0	3.4	0.0
45 and over	56.3	3.1	31.3	3.1	6.3	0.0
Don't know	71.4	0.0	14.3	0.0	0.0	14.3
Not stated	50.0	4.5	36.4	4.5	0.0	4.5
Marital Status						
Single	41.2	2.1	47.4	4.1	1.0	4.1
Married	58.6	2.6	29.6	3.3	3.3	2.6
Divorced	40.0	0.0	60.0	0.0	0.0	0.0
Widowed	50.0	0.0	37.5	0.0	12.5	0.0
Not stated	50.0	0.0	25.0	0.0	0.0	25.0
Educational Level						
No Schooling	63.3	3.8	26.6	1.3	3.8	1.3
Lower Basic	61.9	0.0	38.1	0.0	0.0	0.0
Upper Basic	52.3	0.0	34.1	6.8	2.3	4.5
Senior Secondary/High School	50.6	2.6	39.0	2.6	0.0	5.2
Post-Secondary	30.0	0.0	63.3	3.3	0.0	3.3
Other	9.1	9.1	36.4	18.2	27.3	0.0
Not stated	50.0	0.0	25.0	0.0	0.0	25.0
Religion						
Muslim	51.0	2.5	37.9	2.9	2.1	3.7
Christian	50.0	0.0	25.0	0.0	25.0	0.0
Not stated	57.9	0.0	26.3	10.5	5.3	0.0
Ethnic Group						
Mandinka	55.3	0.0	37.9	4.5	0.0	2.3
Wolof	34.5	13.8	44.8	0.0	3.4	3.4
Fula	50.7	0.0	32.9	4.1	5.5	6.8
Jola	60.0	0.0	40.0	0.0	0.0	0.0
Sarahule	80.0	0.0	20.0	0.0	0.0	0.0
Serere	0.0	25.0	75.0	0.0	0.0	0.0
Manjago	37.5	12.5	37.5	0.0	12.5	0.0
Other	50.0	0.0	50.0	0.0	0.0	0.0
Not stated	83.3	0.0	0.0	0.0	16.7	0.0

Figure 8 shows that for those who reported that FGM is practiced in their communities, none of them reported that the father alone is involve in making decision for the girl child to be

circumcised. On the other hand, about 97 percent reported that either the mother alone or both parents are involved in making decision as to whether the girl child should be circumcised or not.

Figure 8: Percentage distribution of those who reported FGM is practiced in their communities by who mainly decides for girl to be circumcised

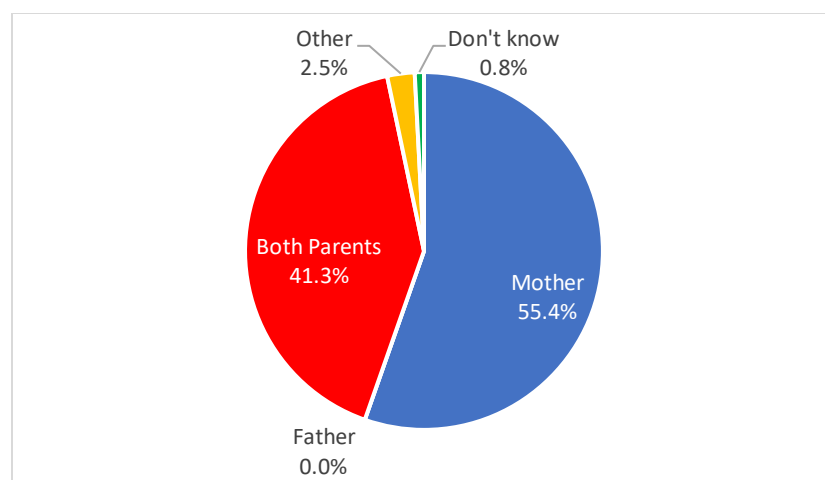


Table 4 shows the perception of respondents on whether they consider FGM harmful. More than half (57.1%) of the respondents considered FGM to be harmful. By age group, those aged 45 years and over reported the highest proportion that they consider FGM to be harmful. Seven out of 10 of those aged 45 years and over considered FGM to be harmful.

Table 4: Percentage distribution of the perception of respondents on whether they consider FGM harmful by Sex, Age Group, Marital Status, Educational Level, Religion and Ethnicity

	Perception on whether FGM is harmful			
	Yes	No	Don't know	Not stated
Total	57.1	32.0	9.8	1.1
Sex				
Female	58.5	32.8	7.2	1.5
Male	53.5	29.6	16.9	0.0
Age Group				
10-17	64.7	23.5	11.8	0.0
18-24	56.1	31.7	11.0	1.2
25-34	57.1	28.6	13.0	1.3
35-44	51.7	37.9	10.3	0.0
45 and over	71.9	25.0	3.1	0.0
Don't know	28.6	57.1	0.0	14.3
Not stated	50.0	45.5	4.5	0.0
Marital Status				

	Perception on whether FGM is harmful			
	Yes	No	Don't know	Not stated
Single	61.9	22.7	14.4	1.0
Married	54.6	37.5	7.2	0.7
Divorced	80.0	0.0	20.0	0.0
Widowed	37.5	62.5	0.0	0.0
Not stated	50.0	25.0	0.0	25.0
Educational Level				
No Schooling	49.4	41.8	7.6	1.3
Lower Basic	47.6	42.9	9.5	0.0
Upper Basic	59.1	36.4	4.5	0.0
Senior Secondary/High School	64.9	24.7	10.4	0.0
Post-Secondary	63.3	16.7	20.0	0.0
Other	63.6	9.1	18.2	9.1
Not stated	25.0	50.0	0.0	25.0
Religion				
Muslim	56.0	33.7	9.1	1.2
Christian	100.0	0.0	0.0	0.0
Not stated	63.2	15.8	21.1	0.0
Ethnic Group				
Mandinka	50.0	38.6	9.8	1.5
Wolof	86.2	13.8	0.0	0.0
Fula	58.9	27.4	12.3	1.4
Jola	40.0	40.0	20.0	0.0
Sarahule	60.0	40.0	0.0	0.0
Serere	50.0	50.0	0.0	0.0
Manjago	75.0	25.0	0.0	0.0
Other	75.0	25.0	0.0	0.0
Not stated	33.3	16.7	50.0	0.0

Table 5 presents the percentage distribution of whether respondents consider FGM a violation of the rights of the child/woman. More than half (53.4%) of the respondents considered FGM to be a violation of the rights of the child/woman. By sex, a higher proportion of females (55.9%) compared to males (46.5%) considered FGM to be a violation of the rights of the child/woman.

Table 5: Percentage distribution of whether FGM is considered a violation of the rights of the child/woman by Sex, Age Group, Marital Status, Educational Level, Religion and Ethnicity

	FGM a violation of the rights of a child/ woman			
	Yes	No	Don't know	Not stated
Total	53.4	28.9	15.0	2.6
Sex				
Female	55.9	28.7	14.4	1.0
Male	46.5	29.6	16.9	7.0
Age Group				
10-17	64.7	17.6	11.8	5.9
18-24	51.2	26.8	20.7	1.2
25-34	57.1	27.3	14.3	1.3
35-44	48.3	37.9	6.9	6.9
45 and over	65.6	15.6	15.6	3.1
Don't know	28.6	57.1	0.0	14.3
Not stated	36.4	50.0	13.6	0.0
Total	53.4	28.9	15.0	2.6
Marital Status				
Single	58.8	22.7	17.5	1.0
Married	52.0	31.6	13.8	2.6
Divorced	40.0	20.0	20.0	20.0
Widowed	37.5	50.0	12.5	0.0
Not stated	25.0	50.0	0.0	25.0
Total	53.4	28.9	15.0	2.6
Educational Level				
No Schooling	45.6	40.5	12.7	1.3
Lower Basic	23.8	42.9	33.3	0.0
Upper Basic	68.2	18.2	13.6	0.0
Senior Secondary/High School	61.0	22.1	13.0	3.9
Post-Secondary	50.0	30.0	13.3	6.7
Other	63.6	9.1	27.3	0.0
Not stated	50.0	25.0	0.0	25.0
Total	53.4	28.9	15.0	2.6
Religion				
Muslim	53.1	30.5	13.6	2.9
Christian	75.0	0.0	25.0	0.0
Not stated	52.6	15.8	31.6	0.0
Total	53.4	28.9	15.0	2.6
Ethnic Group				
Mandinka	45.5	40.2	11.4	3.0
Wolof	82.8	10.3	6.9	0.0
Fula	57.5	17.8	20.5	4.1

	FGM a violation of the rights of a child/ woman			
	Yes	No	Don't know	Not stated
Jola	20.0	40.0	40.0	0.0
Sarahule	40.0	60.0	0.0	0.0
Serere	50.0	25.0	25.0	0.0
Manjago	62.5	12.5	25.0	0.0
Other	100.0	0.0	0.0	0.0
Not stated	33.3	16.7	50.0	0.0

Table 6 shows the percentage distribution of whether respondents think FGM is a religious obligation or requirement. The data shows that 51.9 percent of the respondents think FGM is a religious obligation or requirement. By religion, none of the people who reported to be Christians think that FGM is a religious obligation or requirement compared to 53.5 percent of the Muslims who think that FGM is a religious obligation or requirement.

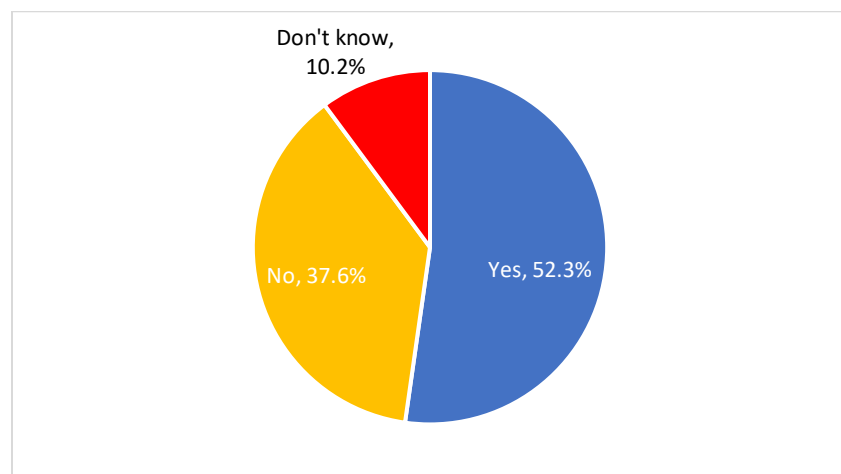
Table 6: Percentage distribution of whether FGM is considered a religious obligation or requirement by Sex, Age Group, Marital Status, Educational Level, Religion and Ethnicity

	FGM a religious obligation or requirement			
	Yes	No	Don't know	Not stated
Total	51.9	30.5	16.5	1.1
Sex				
Female	52.8	31.3	14.9	1.0
Male	49.3	28.2	21.1	1.4
Age Group				
10-17	47.1	29.4	23.5	0.0
18-24	53.7	28.0	18.3	0.0
25-34	46.8	36.4	15.6	1.3
35-44	58.6	24.1	17.2	0.0
45 and over	50.0	28.1	18.8	3.1
Don't know	57.1	14.3	14.3	14.3
Not stated	59.1	36.4	4.5	0.0
Marital Status				
Single	47.4	30.9	21.6	0.0
Married	55.9	30.3	12.5	1.3
Divorced	60.0	20.0	20.0	0.0
Widowed	50.0	25.0	25.0	0.0
Not stated	0.0	50.0	25.0	25.0
Educational Level				
No Schooling	57.0	25.3	16.5	1.3
Lower Basic	71.4	23.8	4.8	0.0

	FGM a religious obligation or requirement			
	Yes	No	Don't know	Not stated
Upper Basic	52.3	29.5	18.2	0.0
Senior Secondary/High School	44.2	36.4	19.5	0.0
Post-Secondary	53.3	33.3	13.3	0.0
Other	27.3	45.5	18.2	9.1
Not stated	50.0	0.0	25.0	25.0
Religion				
Muslim	53.5	30.0	15.2	1.2
Christian	0.0	75.0	25.0	0.0
Not stated	42.1	26.3	31.6	0.0
Ethnic Group				
Mandinka	68.9	20.5	9.8	0.8
Wolof	24.1	58.6	13.8	3.4
Fula	32.9	34.2	31.5	1.4
Jola	80.0	20.0	0.0	0.0
Sarahule	60.0	20.0	20.0	0.0
Serere	75.0	25.0	0.0	0.0
Manjago	0.0	75.0	25.0	0.0
Other	75.0	25.0	0.0	0.0
Not stated	50.0	33.3	16.7	0.0

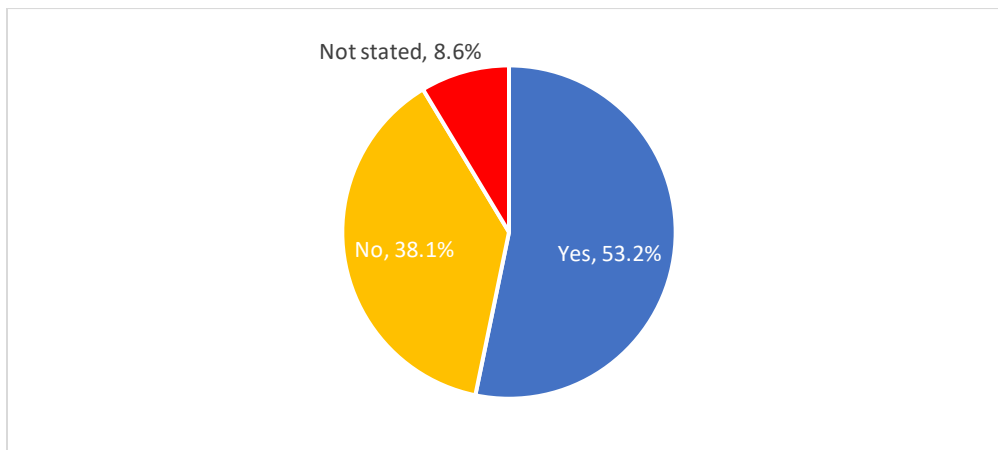
Respondents were asked whether they think FGM should be stopped and at least half (52.3%) of the respondents think it should be stopped while 37.6 percent think it should not be stopped (see Figure 9).

Figure 9: Percentage distribution on whether FGM should be stopped



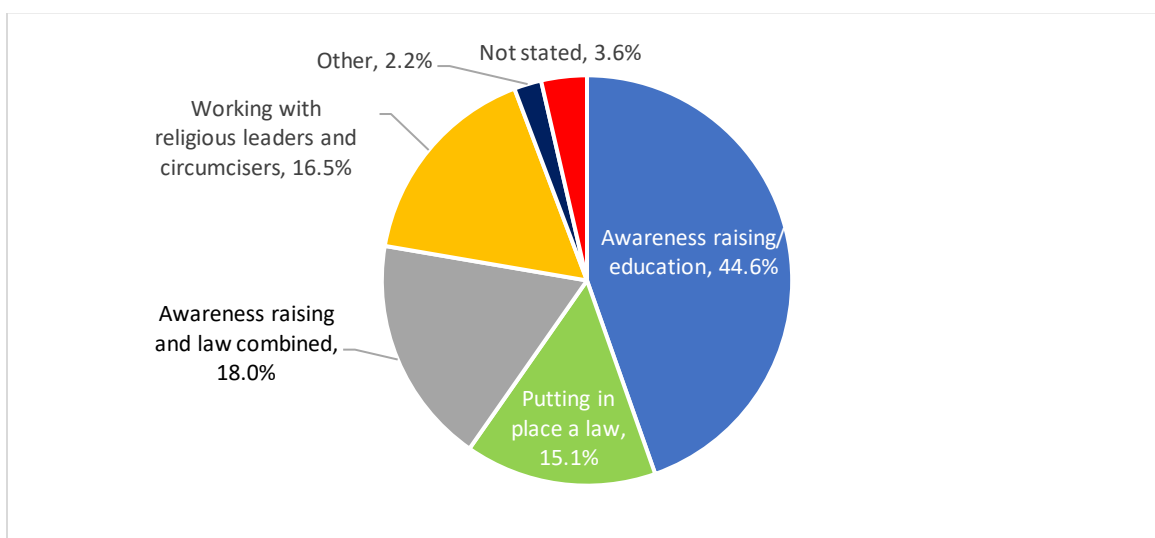
People might know of the harmful effects of FGM but may not oppose it for reasons best known to them. Thus, respondents were asked whether they have ever opposed FGM and almost 4 out of 10 of the respondents reported that they have never opposed FGM while 53.2 percent of the respondents reported that they have ever opposed FGM (see Figure 10).

Figure 10: Percentage distribution of ever opposed FGM



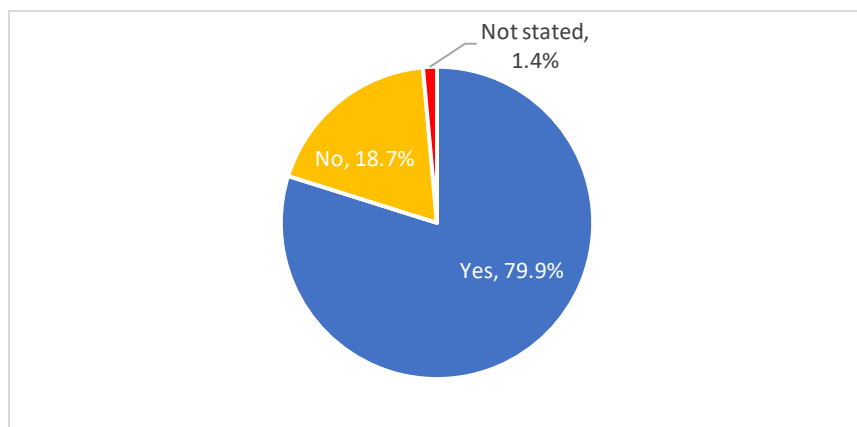
Civil Society Organizations have been embarking on different strategies in order to advocate the end to FGM. Thus, respondents were asked the most effective way to stop FGM. About 45 percent of the respondents reported that awareness raising is the most effective way to stop FGM. This was followed by those who reported that the combination law and at the same time raising awareness is the most effective way to end FGM (see Figure 11).

Figure 11: Percentage distribution of most effective way to stop FGM



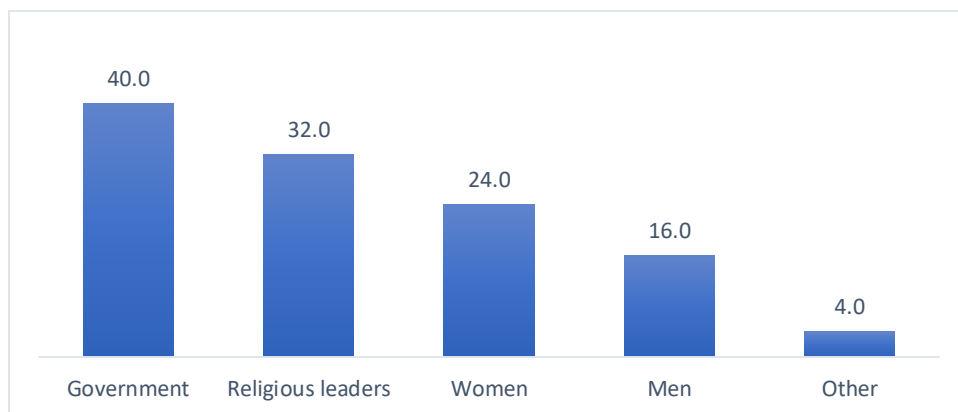
The data show that most of the respondents (79.9%) believe it is their responsibility to protect girls and women from FGM while only 18.7 percent of the respondents reported that it is not their obligation to protect girls against FGM (see Figure 12).

Figure 12: Percentage distribution of obligation to protect women & girls against FGM



Respondents were also asked whose responsibility they think it is to protect girls and women against FGM. The data in Figure 13 shows that the most cited response was government reported by 40 percent of the respondents, this is followed by religious leaders (32%) and women (24%).

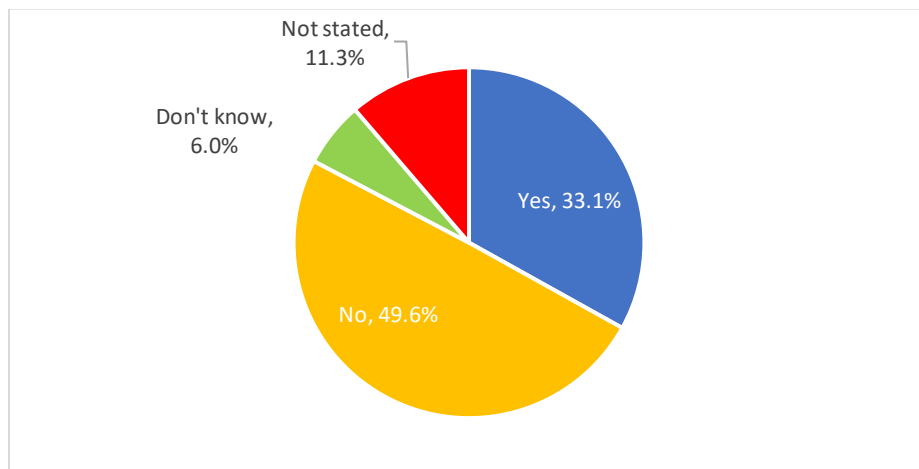
Figure 13: Percentage distribution of responsibility to protect women & girls against FGM



To determine how respondents will respond to FGM if it were to be performed on their own daughter, thus, respondents were asked whether they will carry out FGM on their own daughters. Almost half (49.6%) reported that they will not conduct FGM on their daughter and only 33.1

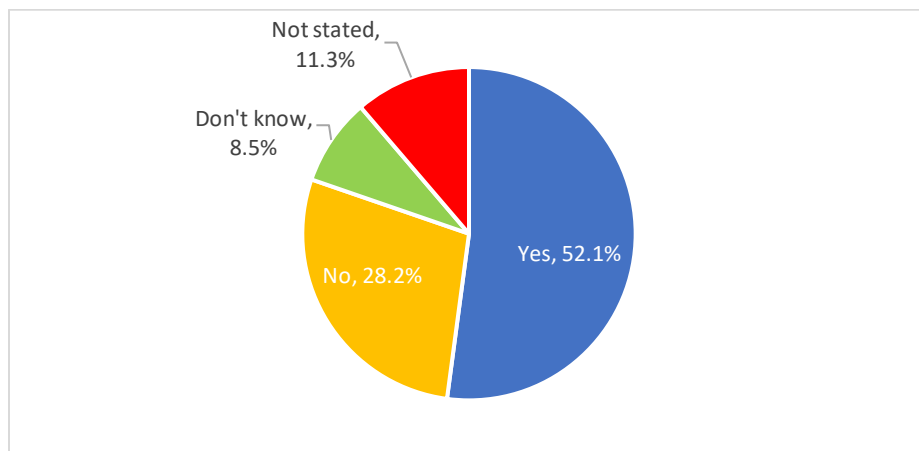
percent reported that they will. This shows that people might not care much whether the practice is generally stopped or not, but they care if it has to be done on their own daughter (see Figure 14).

Figure 14: Percentage distribution of whether one will carry out FGM on own daughter



One of the questions which was asked to the male respondents asked whether they will marry an uncircumcised woman and more than half (52.1%) of the male respondents were indifferent while 28.2 percent reported that they will not marry uncircumcised women (see Figure 15).

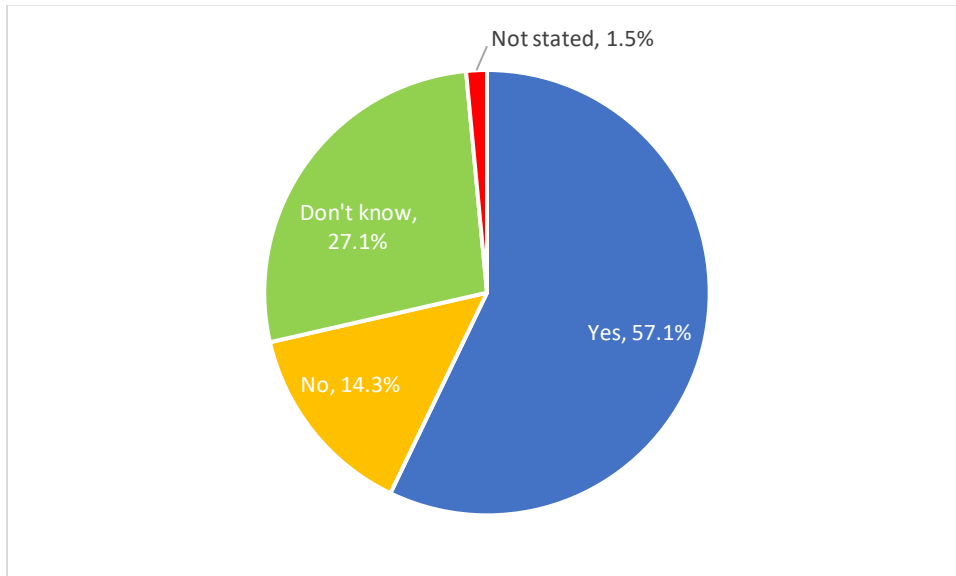
Figure 15: Percentage distribution of marry an uncircumcised woman



To protect particularly women and girls from FGM, The Gambia has ratified instruments protecting women and girls against FGM and it has also enacted laws prohibiting FGM of any form. Thus, respondents were asked whether they know of any anti-FGM ratification of instruments protecting girls against FGM. Overall, 57.1 percent of the respondents reported that

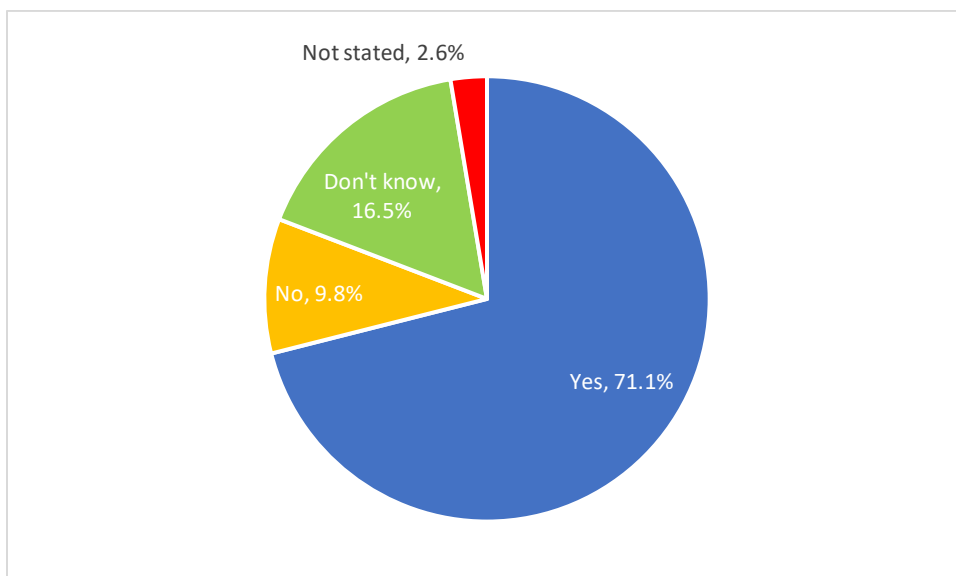
they are aware of the ratification of anti-FGM child right conventions while 27.1 percent of the respondents reported that they don't know of any such ratification (see Figure 16).

Figure 16: Percentage distribution of knowledge on ratification of anti-FGM child's right convention



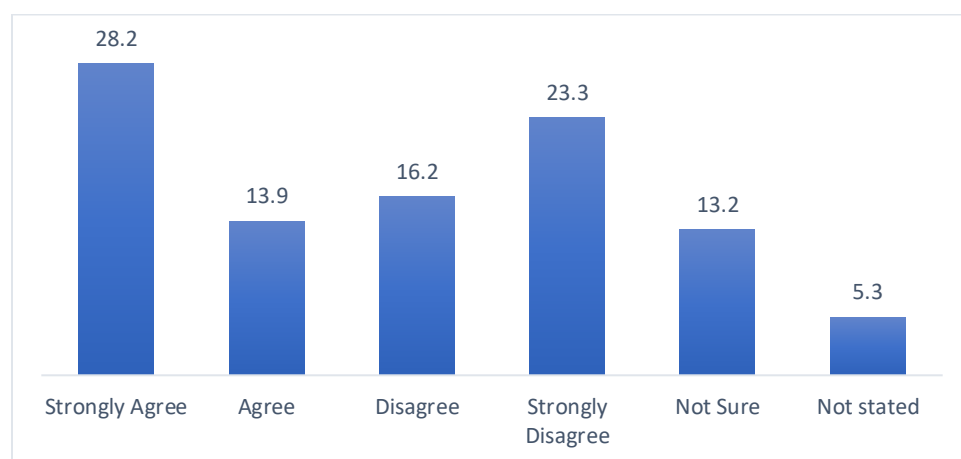
It is important to know awareness of respondents with regards to the existence of laws prohibiting FGM in The Gambia. As such respondents were asked whether they are aware of the existence of laws prohibiting FGM in The Gambia. About 7 out of 10 of the respondents reported that they are aware of the existence of a law that prohibits FGM (see Figure 17).

Figure 17: Percentage distribution of awareness of the existence of legislation prohibiting any form of FGM



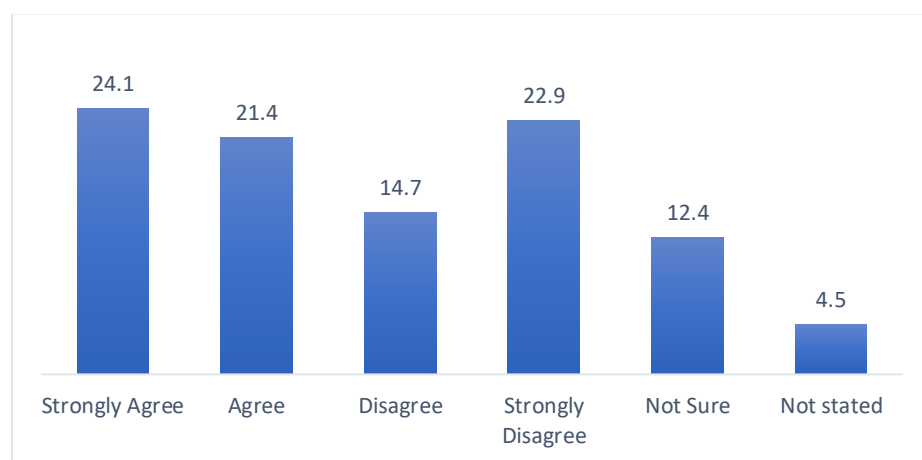
Respondents were asked to rate the following statements on a scale of 1 to 5 where 1 represents strongly agree and 5 represents strongly disagree. For the first statement which reads FGM prevents girls from having premarital sex or relations before marriage, 42.1 percent of the respondents reported agree or strongly agree that FGM prevents girls from having premarital sex or relations before marriage while 39.5 percent of the respondents disagree or strongly disagree that FGM prevents girls from having premarital sex or relations before marriage (see Figure 18).

Figure 18: Percentage distribution of rating on FGM prevents girls from having premarital sex or relations before marriage



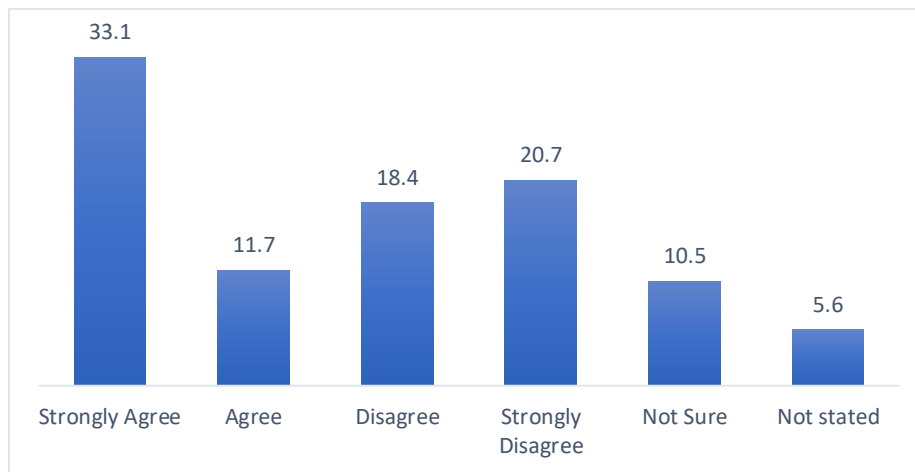
For the second statement which reads FGM purifies or makes a woman cleaner, 45.5 percent of the respondents agree or strongly agree to the statement while 37.6 percent of the respondents disagree or strongly disagree to the statement (see Figure 19).

Figure 19: Percentage distribution of rating on FGM purifies or makes a woman cleaner



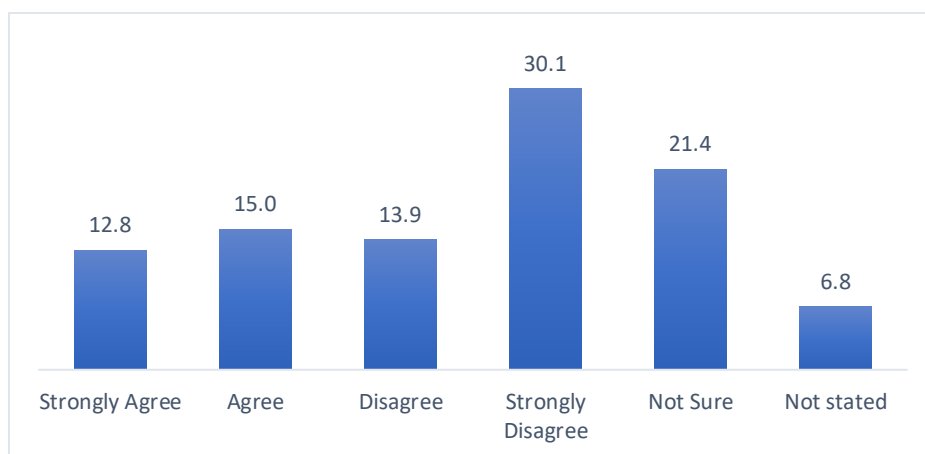
The third statement which reads FGM is a religious requirement, 44.8 percent of the respondents agree or strongly agree to the statement while 39.1 percent of the respondents disagree or strongly disagree to the statement (see Figure 20).

Figure 20: Percentage distribution of rating on FGM a religious requirement



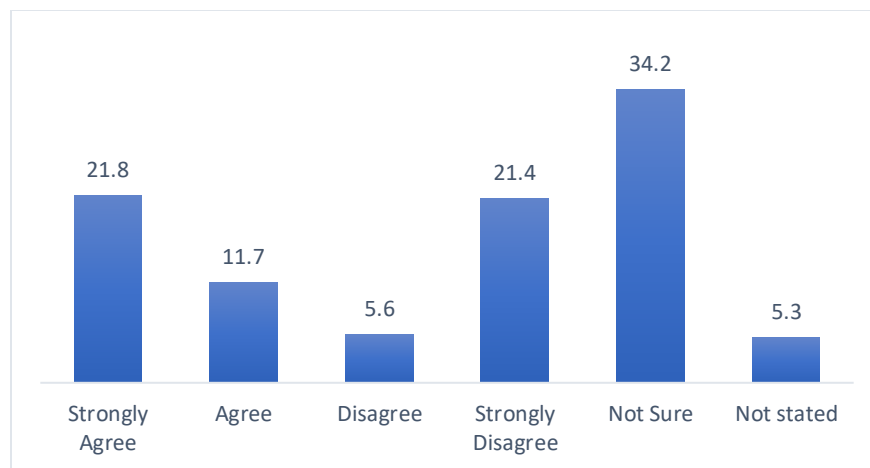
The fourth statement which reads FGM makes girls marriageable, 44 percent of the respondents disagree or strongly disagree to the statement while only 27.8 percent of the respondents agree or strongly agree to the statement (see Figure 21).

Figure 21: Percentage distribution of rating on FGM makes girls marriageable



For the final statement which reads FGM limits a woman's sexual desire, more than half of the respondents (33.5%) agree or strongly agree to the statement while 27 percent of the respondents disagree or strongly disagree to the statement (see Figure 22).

Figure 22: Percentage distribution of rating on FGM limits a woman's sexual desire



Chapter 4: Analysis of Findings

Occurrence and information

Respondents were asked on whether they have ever received information on FGM. The results indicated that 9 out of 10 of the respondents reported that they have received information on FGM. By sex, more females ever received information on FGM compared to males, 93.8 percent and 85.9 percent respectively. Respondents were further asked to state the main sources they derived information on FGM from the list given to them. The source of information on FGM which was reported the most by respondents was the radio rating by 51.6%, followed by family members (39.6%) and television (27%). Thus, the

This confirms that use of the media particularly, the electronic media to sensitize people on FGM is a good initiative.

Clearly, community outreach is of essence as quite a large percentage of the respondent rely on discussions at the family level to obtain information relating to FGM as such, it is important that advocates disseminate the right information during community outreach.

Practice of FGM

47% of the respondents reported that FGM is practiced in their communities while 35.6 percent reported that it is not practiced in their communities. This is not surprising as this region (LRR) has the second highest rate on FGM of 94%¹. The fact that almost 50% of the community still practice FGM is a cause for concern and requires more campaign within the region to lower the rate of the practice.

Decision on FGM

More than half (51.5) of the respondents reported that the mother alone makes the decision followed by those who reported that both parents (36.8%) are involved in deciding whether their

¹ <https://www.thegirlgeneration.org/sites/default/files/files/CountryBriefings-TheGambia-Final-PrintVersion-nobm-compressed.pdf>

girl child is to be circumcised or not. By sex, more females reported that the mother alone makes the decision (57.9%) compared men (33.8%).

Clearly, women seem to be the main decision-makers on FGM in this region which is also the case in the Central River Region ² and the promoters of FGM. The findings may later reveal the reason why women champion FGM but it is important at this juncture to note that the women need to be mainly targeted in this region to ensure a significant reduction on FGM if not a total eradication.

The most effective way to stop FGM

Civil Society Organizations have been embarking on different strategies in order to advocate the end to FGM. The highest proportion of the most effective way to stop FGM cited by respondents was awareness raising/education (44.6%), followed by awareness raising and law combined (18 %); and working with religious leaders and circumcisers (16.5 %).

This finding supports the theory that the main method of eradicating FGM in high prevalence rate communities is social change communication methods and awareness raising intervention. Although, it is appreciated that enactment of laws are also sustainable preventive measures, the general community perspective of its effectiveness appears to be low.

Perception on FGM

In gauging the perception of the respondents on FGM the following questions were asked:

- Do you consider FGM is harmful practice?

More than half (57.1%) of the respondents considered FGM to be harmful. By age group, those aged 45 years and over reported the highest proportion i.e. 71.9% that they consider FGM to be harmful. Seven out of 10 of those aged 45 years and over considered FGM to be harmful.

This is a clear indication that there is a gap on the knowledge of the youth regarding FGM. If there is to be a total eradication of FGM then it is important to enlighten the future parents so that they will refrain from making decisions harmful to their girl-child. The

² Market Day Sensitisation and Baseline Survey on FGM in CRR, Nov 2018

youth are a vital target group in ensuring FGM ends in a generation as such, they should be targeted more in this region by advocates.

- Do you consider FGM a violation of the rights of a child/woman?

More than half (53.4%) of the respondents considered FGM to be a violation of the rights of the child/woman. Although, this is quite low considering the percentage of 72 in the Central River Region. By sex, a higher proportion of females (55.9%) compared to males (46.5%) considered FGM to be a violation of the rights of the child/woman.

This is an indication that FGM is now been recognized as violation of rights of a child/woman and the interventions by anti-FGM advocates appears to be effective. However, the number is only barely 50% as such more reinforcement interventions should be conducted by anti-FGM advocates in this region.

- Do you consider FGM as a religious obligation or requirement?

The data shows that 51.9 percent of the respondents think FGM is a religious obligation or requirement. Out of these 51.9% none of them were Christian but 53.5% were Muslim.

The fact more than 50% of the respondents consider FGM as a religious obligation confirms the misconception that FGM is affiliated to religion. Based on this finding, it is important to reiterate the fact that religious leaders must be highly targeted and sensitized on FGM and the misconception on FGM being a religious obligation needs to be clarified by Anti-FGM advocates.

- Do you think FGM should be stopped?

Majority of the respondents (52.3%) believe that FGM is a practice that should be stopped whilst 37.6 % believe that practice should be maintained. Again, this indicates that the interventions of the Anti-FGM advocates are increasingly successful. However, the resistance rate is still high. It is important that more awareness raising activities be conducted with a strategic approach to ensure a change of perception of the outstanding 37.6%.

- Have you ever opposed FGM?

Respondents were asked whether they have ever opposed FGM and almost 4 out of 10 of the respondents reported that they have never opposed FGM while 53.2 percent of the respondents reported that they have opposed.

FGM is deeply rooted cultural practice that dates many years back. It has been condoned for the longest time and the stigma attached to the opposition of the practice is known.

As a result, the culture of silence regarding FGM is still maintain and difficult to break. It can be concluded that the 38.1% that have never opposed the practice maybe as a result of the culture of silence and as such, capacity building and awareness raising encouraging individuals to break the culture of silence regarding the harmful traditional practice.

- Do you think it is your obligation to protect girls from FGM?

The data showed that most of the respondents (79.9%) believe it is their responsibility to protect girls and women from FGM while only 18.7 percent of the respondents reported that it is not their obligation to protect girls against FGM. This rate is quite high compared to the region of Central River Region which showed that 76% of the respondents believed that it is their obligation. The more community members are enlightened on the issue, the more it becomes a concern in society thereby leading to community members being obligated to protect girls.

- Whose obligation do you think it is to protect girls from FGM?

Majority of the respondents stated that it is the obligation of the government (40%) to protect girls against FGM. This is followed by those who stated that it is the obligation of religious leaders (32%). This finding indicates that the community members acknowledge that the government is a relevant stakeholder in ensuring an end to FGM. In this regard, individuals need the requisite capacity building to be able to hold government accountable in ensuring an effective implementation of the Anti-FGM laws.

- Would you carry out FGM on your own daughter?

To determine how respondents will respond to FGM if it has to be performed on their daughter, thus, respondents were asked whether they will carry out FGM on their own daughters. 49.6% reported that they will not conduct FGM on their daughter and only 33.1 percent reported that they will.

This finding further supports the evidence that Lower Region River indeed has the second highest rate of FGM as only 49.6% of the community agree that they will not carry out FGM on their daughters. This is an indication that campaign on FGM should be increased in this region.

- Would you marry an uncircumcised woman? (Male Respondents)

One of the questions which was asked to the male respondents was whether they will marry an uncircumcised woman. 52.1% of the male respondents stated that it does not matter to them 28.2 percent reported that they will not marry uncircumcised women.

This clarifies the cultural misconception of FGM making a woman marriageable and being performed to please the opposite sex. It is clear that men in this region are not very particular on the performance of FGM on their wives.

- Do you know if The Gambia has ratified anti-FGM child rights conventions?

To protect particularly women and girls from FGM, The Gambia has ratified instruments protecting women and girls against FGM and it has also enacted laws prohibiting FGM of any form. Overall, 57.1 percent of the respondents reported that they are aware of the ratification of anti-FGM child right conventions while 27.1 percent of the respondents reported that they don't know of any such ratification. This is very vital to note as it appears that popularisation of the laws is very important in this community.

- Do you know if The Gambia has ratified anti-FGM child rights?

The findings show that 71.1 per cent of the respondents stated that they know of the existence of the legislation. This is quite impressive as it appears that there is success in the popularization of the anti-FGM law.

Attitudes towards FGM

The purpose of this part was to understand the reaction of the community in relation to certain cultural misconceptions on FGM especially the misconception that failure to perform FGM encourages premarital sex, makes a woman impure amongst others. Respondents were asked to rate the following statements on a scale of 1 to 5 where 1 represents strongly agree and 5 represents strongly disagree.

For the first statement which reads FGM prevents girls from having premarital sex or relations before marriage, 42.1 percent of the respondents reported agree or strongly agree that FGM prevents girls from having premarital sex or relations before marriage while 39.5 percent of the respondents disagree or strongly disagree that FGM prevents girls from having premarital sex or relations before marriage.

For the second statement which reads FGM purifies or makes a woman cleaner, 45.5 percent of the respondents agree or strongly agree to the statement while 37.6 percent of the respondents disagree or strongly disagree to the statement.

The third statement which reads FGM is a religious requirement, 44.8 percent of the respondents agree or strongly agree to the statement while 39.1 percent of the respondents disagree or strongly disagree to the statement .

The fourth statement which reads FGM makes girls marriageable, 44 percent of the respondents disagree or strongly disagree to the statement while only 27.8 percent of the respondents agree or strongly agree to the statement.

For the final statement which reads FGM limits a woman's sexual desire, quite a number of the respondents were unsure and this constitutes quite a high

The findings revealed that the cultural misconceptions around the practice of FGM are still predominant in Lower Region. This is evidence that the community members are becoming aware

that these are cultural misconceptions that are justifiable. By these feedbacks, it is important for advocates to amplify their voices to ensure that all cultural misconceptions are clarified.

Chapter 6: Conclusion

- The study shows that most of the respondents are informed about FGM and radio sensitization about FGM is reported to be the most common ways through which respondents reported to receive information about FGM in LRR.
- Overall, 47 percent reported that FGM is practiced in their communities.
- More than half of the respondents reported that the mother usually takes the decision on whether the girl child should be circumcised.
- More than half of the respondents believe that FGM is harmful.
- About 54 percent of the respondents think FGM is a violation of the rights of a child/woman.
- Many (51.9%) believe that FGM is a religious requirement.
- More than half (52.3%) of the respondents want FGM to be stopped.
- Awareness raising is one of the most effective ways to stop FGM.
- Four out of ten of the respondents reported that Government is responsible for protecting girls and women against FGM.
- Almost half (49.6%) of the respondents reported they will not get daughters circumcised.
- Finally, 57.1 percent of the respondents are aware of the ratification of anti-FGM child's right convention and 7 out 10 people are aware of the existence of a law prohibiting FGM in The Gambia.

Chapter 7: Recommendations

Based on the results of this survey, the following recommendations are being put forward to assist planners, policy makers and all relevant stakeholders in decision making:

- Conduct more community radio shows and Television talk show with specific focus on FGM to reach out to the populace in the communities
- Conduct more in-depth community sensitization with a particular focus on youth and adolescent.
- Initiate an inter-generational dialogue to understand why they older generation see FGM as a harmful traditional practice more than the youth in the region.
- Encourage more participation of religious leaders on Anti-FGM campaigns to clarify misconceptions on FGM and Child Marriage as religious obligations.
- Reinforce government law enforcement with the requisite information and skills to diligently prosecute violations of the Anti-FGM law.
- Capacity Building exercises for women to ensure they possess the requisite knowledge and skills to campaign and resist FGM within the community.

Annex

Annex Table 1: Percentage Distribution of Respondents by Place of Residents

Place of residence	Count	Percent
Angal Futa	2	0.8
Badumeh Kuta	1	0.4
Buiba Musa	1	0.4
Bureng	1	0.4
Darboe Kunda	1	0.4
Jahali	1	0.4
Jappineh	4	1.5
Jarra	16	6.0
Jinoi	2	0.8
Kani Kunda	6	2.3
Kiang	5	1.9
Mabud Fana	1	0.4
Mansakonko	4	1.5
Masaembah	2	0.8
Missira	1	0.4
Niamina Kudang	1	0.4
Pakaliba	1	0.4
Pakalinding	6	2.3
Sambel Kunda	2	0.8
Sanjol	1	0.4
Sare Baldeh	4	1.5
Sare Mawdo	1	0.4
Sare Musa	1	0.4
Sea Kunda	8	3.0
Sinu Bajunkey	1	0.4
Soma	131	49.3
Toniataba	2	0.8
Not stated	59	22.2
Total	266	100

Annex Table 2: Percentage distribution on whether FGM should be stopped by sex, age group, marital status, educational level, religion and ethnicity

	Should FGM be stopped		
	Yes	No	Don't know
Total	52.3	37.6	10.2
Sex			
Female	55.4	36.9	7.7
Male	43.7	39.4	16.9
Age Group			
10-17	52.9	35.3	11.8
18-24	50.0	36.6	13.4

	Should FGM be stopped		
	Yes	No	Don't know
25-34	50.6	41.6	7.8
35-44	55.2	31.0	13.8
45 and over	71.9	21.9	6.3
Don't know	28.6	57.1	14.3
Not stated	40.9	54.5	4.5
Marital Status			
Single	51.5	33.0	15.5
Married	53.3	40.1	6.6
Divorced	60.0	20.0	20.0
Widowed	50.0	50.0	0.0
Not stated	25.0	50.0	25.0
Educational Level			
No Schooling	49.4	41.8	8.9
Lower Basic	42.9	57.1	0.0
Upper Basic	61.4	31.8	6.8
Senior Secondary/High School	51.9	33.8	14.3
Post-Secondary	53.3	36.7	10.0
Other	63.6	18.2	18.2
Not stated	25.0	50.0	25.0
Religion			
Muslim	51.0	39.5	9.5
Christian	100.0	0.0	0.0
Not stated	57.9	21.1	21.1
Ethnic Group			
Mandinka	42.4	50.8	6.8
Wolof	82.8	13.8	3.4
Fula	54.8	24.7	20.5
Jola	40.0	60.0	0.0
Sarahule	40.0	60.0	0.0
Serere	50.0	50.0	0.0
Manjago	87.5	12.5	0.0
Other	75.0	0.0	25.0
Not stated	50.0	33.3	16.7

Annex Table 3: Percentage distribution of ever opposed FGM by sex, age group, marital status, educational level, religion and ethnicity

	Ever opposed FGM		
	Yes	No	Not stated
Total	53.2	38.1	8.6
Sex			
Female	51.9	38.9	9.3
Male	58.1	35.5	6.5
Age Group			
10-17	77.8	11.1	11.1
18-24	56.1	36.6	7.3
25-34	59.0	35.9	5.1
35-44	43.8	43.8	12.5
45 and over	39.1	56.5	4.3
Don't know	50.0	50.0	0.0
Not stated	44.4	22.2	33.3
Marital Status			
Single	62.0	30.0	8.0
Married	48.1	43.2	8.6
Divorced	66.7	0.0	33.3
Widowed	25.0	75.0	0.0
Not stated	100.0	0.0	0.0
Educational Level			
No Schooling	48.7	41.0	10.3
Lower Basic	11.1	66.7	22.2
Upper Basic	55.6	37.0	7.4
Senior Secondary/High School	65.0	25.0	10.0
Post-Secondary	50.0	50.0	0.0
Other	57.1	42.9	0.0
Not stated	100.0	0.0	0.0
Religion			
Muslim	50.0	40.3	9.7
Christian	50.0	50.0	0.0
Not stated	90.9	9.1	0.0
Ethnic Group			
Mandinka	51.8	39.3	8.9
Wolof	62.5	29.2	8.3
Fula	50.0	40.0	10.0
Jola	50.0	0.0	50.0
Sarahule	100.0	0.0	0.0
Serere	50.0	50.0	0.0
Manjago	28.6	71.4	0.0

	Ever opposed FGM		
	Yes	No	Not stated
Other	100.0	0.0	0.0
Not stated	33.3	66.7	0.0

Annex Table 4: Percentage distribution of most effective way to stop FGM by sex, age group, marital status, educational level, religion and ethnicity

	Most effective way to stop FGM					
	Awareness raising/ education	Putting in place a law	Awareness raising and law combined	Working with religious leaders and circumcisers	Other	Not stated
Total	44.6	15.1	18.0	16.5	2.2	3.6
Sex						
Female	48.1	14.8	13.9	17.6	2.8	2.8
Male	32.3	16.1	32.3	12.9	0.0	6.5
Age Group						
10-17	55.6	11.1	11.1	22.2	0.0	0.0
18-24	53.7	17.1	12.2	17.1	0.0	0.0
25-34	35.9	17.9	15.4	23.1	5.1	2.6
35-44	50.0	12.5	18.8	12.5	0.0	6.3
45 and over	39.1	8.7	30.4	13.0	4.3	4.3
Don't know	50.0	0.0	50.0	0.0	0.0	0.0
Not stated	33.3	22.2	22.2	0.0	0.0	22.2
Total	44.6	15.1	18.0	16.5	2.2	3.6
Marital Status						
Single	48.0	16.0	14.0	20.0	0.0	2.0
Married	44.4	14.8	18.5	13.6	3.7	4.9
Divorced	0.0	0.0	66.7	33.3	0.0	0.0
Widowed	50.0	0.0	25.0	25.0	0.0	0.0
Not stated	0.0	100.0	0.0	0.0	0.0	0.0
Total	44.6	15.1	18.0	16.5	2.2	3.6
Educational Level						
No Schooling	35.9	15.4	20.5	15.4	5.1	7.7
Lower Basic	55.6	0.0	11.1	22.2	11.1	0.0
Upper Basic	33.3	33.3	11.1	18.5	0.0	3.7
Senior Secondary/High School	45.0	12.5	20.0	22.5	0.0	0.0
Post-Secondary	56.3	6.3	31.3	6.3	0.0	0.0
Other	85.7	0.0	0.0	0.0	0.0	14.3
Not stated	100.0	0.0	0.0	0.0	0.0	0.0
Total	44.6	15.1	18.0	16.5	2.2	3.6
Religion						

	Most effective way to stop FGM					
	Awareness raising/ education	Putting in place a law	Awareness raising and law combined	Working with religious leaders and circumcisers	Other	Not stated
Muslim	43.5	16.1	16.9	16.9	2.4	4.0
Christian	75.0	0.0	25.0	0.0	0.0	0.0
Not stated	45.5	9.1	27.3	18.2	0.0	0.0
Total	44.6	15.1	18.0	16.5	2.2	3.6
Ethnic Group						
Mandinka	53.6	14.3	16.1	12.5	0.0	3.6
Wolof	37.5	20.8	8.3	20.8	8.3	4.2
Fula	42.5	10.0	25.0	17.5	0.0	5.0
Jola	0.0	50.0	50.0	0.0	0.0	0.0
Sarahule	0.0	0.0	50.0	50.0	0.0	0.0
Serere	0.0	0.0	0.0	50.0	50.0	0.0
Manjago	57.1	14.3	14.3	14.3	0.0	0.0
Other	33.3	0.0	33.3	33.3	0.0	0.0
Not stated	33.3	66.7	0.0	0.0	0.0	0.0
Total	44.6	15.1	18.0	16.5	2.2	3.6

Annex Table 5: Percentage distribution of obligation to protect women & girls from GBV by sex, age group, marital status, educational level, religion and ethnicity

	Obligation to protect women & girls from GBV		
	Yes	No	Not stated
Total	79.9	18.7	1.4
Sex			
Female	80.6	18.5	0.9
Male	77.4	19.4	3.2
Age Group			
10-17	66.7	33.3	0.0
18-24	92.7	7.3	0.0
25-34	76.9	20.5	2.6
35-44	81.3	18.8	0.0
45 and over	65.2	34.8	0.0
Don't know	100.0	0.0	0.0
Not stated	77.8	11.1	11.1
Marital Status			
Single	82.0	16.0	2.0
Married	77.8	21.0	1.2
Divorced	100.0	0.0	0.0
Widowed	75.0	25.0	0.0

	Obligation to protect women & girls from GBV		
	Yes	No	Not stated
Not stated	100.0	0.0	0.0
Educational Level			
No Schooling	79.5	17.9	2.6
Lower Basic	77.8	22.2	0.0
Upper Basic	77.8	22.2	0.0
Senior Secondary/High School	85.0	15.0	0.0
Post-Secondary	68.8	31.3	0.0
Other	85.7	0.0	14.3
Not stated	100.0	0.0	0.0
Religion			
Muslim	79.0	19.4	1.6
Christian	75.0	25.0	0.0
Not stated	90.9	9.1	0.0
Ethnic Group			
Mandinka	76.8	23.2	0.0
Wolof	87.5	8.3	4.2
Fula	82.5	15.0	2.5
Jola	50.0	50.0	0.0
Sarahule	100.0	0.0	0.0
Serere	50.0	50.0	0.0
Manjago	85.7	14.3	0.0
Other	66.7	33.3	0.0
Not stated	66.7	33.3	0.0

Annex Table 6: Percentage distribution of whether one will carry out FGM on own daughter by sex, age group, marital status, educational level, religion and ethnicity

	Carry out FGM on own daughter			
	Yes	No	Don't know	Not stated
Total	33.1	49.6	6.0	11.3
Sex				
Female	32.8	50.8	4.6	11.8
Male	33.8	46.5	9.9	9.9
Age Group				
10-17	29.4	35.3	11.8	23.5
18-24	39.0	52.4	4.9	3.7
25-34	32.5	49.4	6.5	11.7
35-44	31.0	48.3	10.3	10.3
45 and over	18.8	53.1	3.1	25.0
Don't know	28.6	57.1	0.0	14.3
Not stated	40.9	45.5	4.5	9.1

	Carry out FGM on own daughter			
	Yes	No	Don't know	Not stated
Marital Status				
Single	29.9	50.5	9.3	10.3
Married	33.6	50.7	3.9	11.8
Divorced	20.0	80.0	0.0	0.0
Widowed	62.5	12.5	12.5	12.5
Not stated	50.0	25.0	0.0	25.0
Educational Level				
No Schooling	39.2	45.6	5.1	10.1
Lower Basic	52.4	38.1	0.0	9.5
Upper Basic	22.7	56.8	4.5	15.9
Senior Secondary/High School	32.5	50.6	9.1	7.8
Post-Secondary	30.0	46.7	6.7	16.7
Other	9.1	81.8	0.0	9.1
Not stated	25.0	25.0	25.0	25.0
Religion				
Muslim	35.0	48.6	4.9	11.5
Christian	0.0	75.0	0.0	25.0
Not stated	15.8	57.9	21.1	5.3
Ethnic Group				
Mandinka	42.4	42.4	5.3	9.8
Wollof	13.8	75.9	0.0	10.3
Fula	24.7	54.8	8.2	12.3
Jola	40.0	20.0	20.0	20.0
Sarahule	60.0	40.0	0.0	0.0
Serere	0.0	50.0	25.0	25.0
Manjago	37.5	50.0	0.0	12.5
Other	0.0	50.0	25.0	25.0
Not stated	33.3	50.0	0.0	16.7

Annex Table 7: Percentage distribution of marry an uncircumcised woman by sex, age group, marital status, educational level, religion and ethnicity

	Marry an uncircumcised woman			
	Yes	No	Don't know	Not stated
Total	52.1	28.2	8.5	11.3
Sex				
Female	0.0	0.0	0.0	0.0
Male	52.1	28.2	8.5	11.3
Age Group				
10-17	66.7	0.0	0.0	33.3
18-24	45.5	27.3	27.3	0.0

	Marry an uncircumcised woman			
	Yes	No	Don't know	Not stated
25-34	58.6	31.0	3.4	6.9
35-44	38.5	38.5	7.7	15.4
45 and over	66.7	11.1	0.0	22.2
Don't know	0.0	0.0	0.0	0.0
Not stated	33.3	33.3	16.7	16.7
Marital Status				
Single	43.8	28.1	18.8	9.4
Married	55.6	30.6	0.0	13.9
Divorced	100.0	0.0	0.0	0.0
Widowed	100.0	0.0	0.0	0.0
Not stated	100.0	0.0	0.0	0.0
Educational Level				
No Schooling	30.8	53.8	7.7	7.7
Lower Basic	100.0	0.0	0.0	0.0
Upper Basic	56.3	18.8	12.5	12.5
Senior Secondary/High School	55.0	30.0	10.0	5.0
Post-Secondary	55.6	22.2	5.6	16.7
Other	66.7	0.0	0.0	33.3
Not stated	0.0	0.0	0.0	0.0
Religion				
Muslim	50.7	29.0	8.7	11.6
Christian	100.0	0.0	0.0	0.0
Not stated	100.0	0.0	0.0	0.0
Ethnic Group				
Mandinka	43.3	46.7	3.3	6.7
Wolof	71.4	0.0	14.3	14.3
Fula	58.3	16.7	12.5	12.5
Jola	0.0	33.3	33.3	33.3
Sarahule	0.0	0.0	0.0	0.0
Serere	100.0	0.0	0.0	0.0
Manjago	75.0	25.0	0.0	0.0
Other	0.0	0.0	0.0	100.0
Not stated	100.0	0.0	0.0	0.0

Annex Table 8: Percentage distribution of knowledge on ratification of anti-FGM child's right convention by sex, age group, marital status, educational level, religion and ethnicity

	Knowledge on ratification of anti-FGM child's right convention			
	Yes	No	Don't know	Not stated
Total	57.1	14.3	27.1	1.5
Sex				
Female	61.0	15.4	22.6	1.0
Male	46.5	11.3	39.4	2.8
Age Group				
10-17	70.6	0.0	29.4	0.0
18-24	50.0	13.4	36.6	0.0
25-34	58.4	15.6	24.7	1.3
35-44	62.1	13.8	20.7	3.4
45 and over	56.3	12.5	28.1	3.1
Don't know	85.7	0.0	0.0	14.3
Not stated	54.5	31.8	13.6	0.0
Marital Status				
Single	52.6	8.2	38.1	1.0
Married	60.5	17.1	21.1	1.3
Divorced	20.0	40.0	40.0	0.0
Widowed	62.5	25.0	12.5	0.0
Not stated	75.0	0.0	0.0	25.0
Educational Level				
No Schooling	60.8	16.5	20.3	2.5
Lower Basic	42.9	19.0	38.1	0.0
Upper Basic	47.7	27.3	25.0	0.0
Senior Secondary/High School	62.3	6.5	31.2	0.0
Post-Secondary	56.7	10.0	33.3	0.0
Other	72.7	9.1	9.1	9.1
Not stated	25.0	0.0	50.0	25.0
Religion				
Muslim	59.7	14.0	24.7	1.6
Christian	25.0	50.0	25.0	0.0
Not stated	31.6	10.5	57.9	0.0
Ethnic Group				
Mandinka	59.8	14.4	25.0	0.8
Wolof	69.0	10.3	20.7	0.0
Fula	54.8	9.6	32.9	2.7
Jola	20.0	40.0	40.0	0.0
Sarahule	40.0	0.0	40.0	20.0
Serere	75.0	25.0	0.0	0.0
Manjago	50.0	37.5	12.5	0.0

	Knowledge on ratification of anti-FGM child's right convention			
	Yes	No	Don't know	Not stated
Other	50.0	25.0	25.0	0.0
Not stated	16.7	33.3	50.0	0.0

Annex Table 9: Percentage distribution of awareness of the existence of legislation prohibiting any form of GBV by sex, age group, marital status, educational level, religion and ethnicity

	Awareness of the existence of legislation prohibiting any form of GBV			
	Yes	No	Don't know	Not stated
Total	71.1	9.8	16.5	2.6
Sex				
Female	74.9	9.2	13.3	2.6
Male	60.6	11.3	25.4	2.8
Age Group				
10-17	94.1	0.0	5.9	0.0
18-24	63.4	13.4	22.0	1.2
25-34	74.0	7.8	16.9	1.3
35-44	75.9	10.3	10.3	3.4
45 and over	71.9	9.4	15.6	3.1
Don't know	85.7	0.0	0.0	14.3
Not stated	59.1	13.6	18.2	9.1
Marital Status				
Single	64.9	8.2	23.7	3.1
Married	73.7	11.2	13.2	2.0
Divorced	60.0	20.0	20.0	0.0
Widowed	100.0	0.0	0.0	0.0
Not stated	75.0	0.0	0.0	25.0
Educational Level				
No Schooling	77.2	10.1	10.1	2.5
Lower Basic	71.4	14.3	14.3	0.0
Upper Basic	68.2	13.6	15.9	2.3
Senior Secondary/High School	68.8	9.1	19.5	2.6
Post-Secondary	63.3	3.3	33.3	0.0
Other	72.7	9.1	9.1	9.1
Not stated	75.0	0.0	0.0	25.0
Religion				
Muslim	72.0	9.9	15.6	2.5
Christian	25.0	25.0	50.0	0.0
Not stated	68.4	5.3	21.1	5.3
Ethnic Group				
Mandinka	72.0	8.3	17.4	2.3
Wolof	79.3	10.3	10.3	0.0

	Awareness of the existence of legislation prohibiting any form of GBV			
	Yes	No	Don't know	Not stated
Fula	72.6	9.6	15.1	2.7
Jola	40.0	40.0	20.0	0.0
Sarahule	60.0	20.0	0.0	20.0
Serere	75.0	25.0	0.0	0.0
Manjago	62.5	12.5	25.0	0.0
Other	50.0	0.0	25.0	25.0
Not stated	50.0	0.0	50.0	0.0