

‘Footballers can influence young men to start having a discussion’ – the fight against FGM in Africa



By [Katie Whyatt](#) Apr 6, 2022

Ayo Bello cannot remember the day, nearly 30 years ago in Nigeria, when her grandmother mutilated her genitals with a razor blade.

This happens to a girl globally every 10 seconds. Bello was aged “between one and three”.

The realisation quaked to life 20 years later when Bello attended a college conference about female genital mutilation (FGM) and saw images of mutilated vaginas, and other women said that their vaginas looked instead like the pictures of the uncut ones a few slides later.

“I had to check myself in the mirror,” Bello says. “Does this look like what I saw on the projector? Mine looks different.”

The images — and what they meant — thrummed for weeks in Bello’s mind. She would wait until the communal baths were deserted before showering, uncomfortable with showing her body. Her roommates tried to comfort her but Bello felt changed, hardened to the world, struggling to reconcile the body she thought she had always known with one of an FGM survivor. “I felt I was different from other

women,” she says. “I felt other people had good clitoris and I did not. I felt like something was missing.” One friend, straining to comfort Bello, went as far as to liken what had happened to Bello to having a haircut. “But why would you cut the clitoris?” Bello responded. “Your hair and nails grow back. This is not going to grow back.”

FGM, sometimes referred to as female genital cutting (FGC), involves injury to, or full or partial removal of, a girls’ external genitals. Estimates — underreporting is a perennial issue here, as only 32 countries across three continents measure and report on the practice — suggest that more than 200 million women and girls globally have undergone FGC. In reality, the number will be wildly higher, as FGC occurs in more than 90 countries. Some 4.1 million girls are at risk each year from a practice recognised internationally as a violation of human rights but that persists under the guise of tradition or chastity. FGC is not a requirement in any religion, but in the face of lingering stigma, communities are reluctant to change and continue cutting without question.

Often carried out without anaesthetic, the procedure causes heavy scarring — leading to difficulties giving birth — especially if the girl is older and struggles. Mothers who have undergone the more extensive forms of FGM are more likely to die during childbirth. When cut, girls could haemorrhage, fall into shock and bleed to death. Infections can be life-threatening when unsterile tools are used.

“When it comes to giving birth, the cervix will stretch and the baby’s head can pass through,” says Maggie O’Kane, the executive director and co-founder of the Global Media Campaign to End FGM. “If you’ve been mutilated, that area’s covered in scar tissue. It doesn’t stretch and the baby’s head can’t come out. In one camp we were working in, seven girls had died within two weeks because the babies were stuck inside them or they’d lost too much blood. It’s a complete medical disaster for women. And who wants to have sex after that’s been done to you? It’s been done by people who love them.”

Even when understanding the health risks, families cut out of fear of social sanctions, aiming to secure a girls’ marriageability. The birth of Bello’s son was riddled with complications linked to FGM and she has had urinary infections throughout her life. FGM is also linked to

infertility, abscesses, pain during sex, depression and flashbacks, and self-harm.

Eighty per cent of cases occur in Africa. In Somalia, 98 per cent of women have undergone the procedure; in Sudan, where there is now legislation against FGB, the figure is 90 per cent. FGM is practised in hospitals under anaesthetic in Indonesia and often the results “are more severe”, O’Kane says, “because there’s no resistance and you can’t fight back”.

During the Africa Cup of Nations, the Global Media Campaign (GCM) to End FGM partnered with three African footballers: the former Barcelona winger and Nigeria Under-17 manager Emmanuel Amunike (above centre), who won a gold medal for Nigeria at the 1996 Olympics; Emmanuel Babayaro (above left), the goalkeeper in that Olympics team; and Efe Ambrose (above right), now at Dunfermline and previously [Celtic](#) and Hibernian. Each posted video messages, declaring: “My daughter is born perfect — say no to FGM.”



Emmanuel Amunike was Nigeria U17 manager from 2014-2017 (Photo: Getty)

Between them, they managed more than 128,000 views in a week, reaching 231,000 people, and GMC is in discussions with the

Confederation of African Football around longer-term campaigns. The GMC has the support of the UN and anticipates a project around the World Cup, but its campaign is still lacking a sponsor.

Even for a man, speaking out is not without risk. FGM fuses ideas around gender, politics, religion, sex and culture, subjects still taboo in many countries. Anticipating a backlash, some footballers did not want their daughters to be filmed and Amunike was the first player to sign up. Bello has campaigned against FGM for several years: resistance was at its highest before she got married, and often security accompanied her on her visits to certain communities. “Some would just walk out of the congregation, give nasty comments,” she says. “But once you get the backlash, it means they’re listening. It means there’s a reaction.”

A handful of other footballers are considering joining, including one former [Manchester United](#) player. They are, says GMC director Mano Manoharan, “sticking their head above the parapet”.

“When I arrived, the top people for influencing people were religious leaders and doctors,” says Manoharan. “This is another avenue. Footballers can influence young men to actually start having a discussion and can hit a demographic no other campaign can reach. If we don’t hit young men, who are going to become parents, at the right time and engage with them in their language, we’re not going to bring systemic change.

“No one is going to watch that video and go: ‘I am stopping FGM’. The next step is discussing that at the dinner table with their parents. At what point do attitudes change? It’s really done within the small groups, family units and communities. So we’re hoping that this stimulates a change and a conversation. These footballers — they are the catalyst.”

“When we were working in Nigeria, every single cafe was watching the Premier League,” adds O’Kane. “Fathers love their daughters and they see it as their job to protect them. These footballers have come forward with their daughters, taking on the responsibility of helping to end this practice. It’s been threaded in silence, and we’re hoping the

World Cup will take away the veil of silence and men will come out and protect their daughters.”

After posting his video, scores of female friends contacted Babayaro to say that they had been mutilated. “We’re surrounded by it in Nigeria,” he says. “I’m almost certain my sisters are affected by it. Some say, ‘This happened to me’, and leave it there, don’t go any further. I’ve been able to talk to two or three people about it and it’s left a very indelible mark, a psychological thing in their head. Some of them are always haunted by that because it happened to them when they were probably about three or four. They can remember the trauma. They see other females and they feel different.”

He spoke to a new mother who had been mutilated as a child and resolved that it would not happen to her own daughter. She ran an errand and “before she came back, her own mother and her husband conspired, and did this to her own child. When she wanted to talk, they beat her and told her not to talk: ‘This is the tradition. It must be done’. There’s nothing she could do about it. She was helpless”.

He continues: “If you are my elder, and you do something that the whole world knows is wrong, traditionally, I’m not even allowed to say: ‘This is wrong. Don’t do it’. You don’t talk to your elders. We don’t have to fight our parents; we need to get into more dialogue with them, make them understand why they should not cut anymore.”

Inevitably, FGM is bound to women’s rights. Where a girl is viewed as property and exchanged in marriage, FGM is typically linked to ideas around honour, and safeguarding the paternity of future offspring. Ambrose hopes that his voice will help to hand women back their own.

“It’s something we all knew that is going on but nobody has really come out to speak about it,” he says. “They don’t want to come out because of the way people look at them, people will treat them afterwards. It really gets them scared, afraid to come out. It’s something people just keep inside. Even though they’re dying inside, they don’t speak out.

“In life, people die in silence. For the young girls that cannot speak up for themselves, they have the right to say no or yes. You cannot just force it on them. Give them back their voice.”

Change can arrive slowly in the face of such deeply-rooted beliefs, but a recent GMC study on FGM in Nigeria found that 14 per cent of people who had planned to carry out FGM on their daughters had now changed their minds, and 78 per cent of those as a result of media coverage. However, around a fifth of respondents remained unconfident in discussing FGM and the associated health risks, and a quarter FGM and girls’ rights, indicating the scale of the task ahead.

But it is worthwhile work. Babayaro recalls a conversation with the FGM survivor and campaigner who enlisted his help for the Born Perfect campaign. “I had to take a second look: ‘You’re still feel victimised, even at this age. You’re a mother, you’re a successful woman and a professional’. I’m thinking she would have been over it by now. She said to me: ‘You just can never be over this thing’. That is why this needs to be done, so we can save as many people as possible.”